

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 28, 2002 8:00 am
Secretary of State

03-28-2002 90007 007 ****55.00

DOCUMENT # L02000000105

1. Entity Name

LK ROOF COATINGS & MAINTENANCE, LLC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

HC5 BOX 1016

Suite, Apt. #, etc.

P.O. BOX 868

City & State

OLD TOWN, FLA.

City & State

OLD TOWN, FLA.

Zip

32680

Country

USA

Zip

32680

Country

USA

DO NOT WRITE IN THIS SPACE

4. FEI Number

03-0382895

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$5.00 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

KEN DOWELL

Street Address (P.O. Box Number is Not Acceptable)

1519 SATSUMA ST.

City CLEARWATER

FL

Zip Code 33756

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE Ken Dowell MGR

Signature, typed or printed name of registered agent and title if applicable.

3-5-2002

DATE

FEE IS \$50.00

**Make Check Payable to Department of State
DUE BY MAY 1**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	KEN DOWELL
STREET ADDRESS	1519 SATSUMA ST.
CITY-ST-ZIP	CLEARWATER, FL 33756
TITLE	MGRM
NAME	LINDA DOWELL
STREET ADDRESS	1519 SATSUMA ST.
CITY-ST-ZIP	CLEARWATER, FL 33756
TITLE	MGRM
NAME	TERRY VALE
STREET ADDRESS	520 NEW ST.
CITY-ST-ZIP	FAIRPORT HARBOR, OH. 44077
TITLE	MGRM
NAME	NANCY VALE
STREET ADDRESS	520 NEW ST.
CITY-ST-ZIP	FAIRPORT HARBOR, OH. 44077
TITLE	MGRM
NAME	STEVE BABB
STREET ADDRESS	73 CRESTWOOD DR.
CITY-ST-ZIP	PAINESVILLE, OH. 44077
TITLE	MGRM
NAME	SHELLY BABB
STREET ADDRESS	73 CRESTWOOD DR.
CITY-ST-ZIP	PAINESVILLE, OH. 44077

TITLE	
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CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

CR2E083B (12/01)

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Ken Dowell MGR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

3-5-2002 352-542-2696

Date

Daytime Phone #