

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L02000000105

FILED
Jun 12, 2003
Secretary of State

Entity Name: LK ROOF COATINGS & MAINTENANCE, LLC

Current Principal Place of Business:

1519 SATSUMA STREET
HC5 BOX 1016
OLD TOWN, FL 32680

New Principal Place of Business:

PO BOX 868
HC5 BOX 1016
OLD TOWN, FL 32680

Current Mailing Address:

P O BOX 868
OLD TOWN, FL 32680

New Mailing Address:

FEI Number: 03-0382895 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOWELL, KEN
1519 SATSUMA STREET
CLEARWATER, FL 33756 US

Name and Address of New Registered Agent:

DOWELL, KEN
PO BOX 868
OLD TOWN, FL 33756 US

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: KENNER H DOWELL

06/12/2003

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: DOWELL, KEN
Address: 1519 SARSUMA ST.
City-St-Zip: CLEARWATER, FL 33756

Title: MGR () Delete
Name: DOWELL, LINDA
Address: 1519 SATSUMA ST.
City-St-Zip: CLEARWATER, FL 33756

Title: MGR () Delete
Name: VALE, TERRY
Address: 520 NEW ST
City-St-Zip: FAIRPORT HARBOR, OH 44077

Title: MGR () Delete
Name: VALE, NANCY
Address: 520 NEW ST.
City-St-Zip: FAIRPORT HARBOR, OH 44077

Title: MGRM () Delete
Name: BABB, STEVE
Address: 73 CRESTWOOD DR.
City-St-Zip: PAINESVILLE, OH 44077

Title: MGRM () Delete
Name: BABB, SHELIA
Address: 73 CRESTWOOD DR.
City-St-Zip: PAINESVILLE, OH 44077

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: DOWELL, KEN
Address: PO BOX 868
City-St-Zip: OLD TOWN, FL 32680

Title: MGR (X) Change () Addition
Name: DOWELL, LINDA
Address: PO BOX 868
City-St-Zip: OLD TOWN, FL 32680

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: LINDA DOWELL

S/T

06/12/2003

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date