

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000043633

FILED
Apr 24, 2008
Secretary of State

Entity Name: DOUBLE J DRYWALL "LLC"

Current Principal Place of Business:

5 FENWOOD LANE
PALM COAST, FL 32137

New Principal Place of Business:

Current Mailing Address:

5 FENWOOD LANE
PALM COAST, FL 32137

New Mailing Address:

FEI Number: 20-0129937

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHELAN, JAMES H SR.
5 FENWOOD LANE
PALM COAST, FL 32137 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WHELAN, JAMES H SR
Address: 5 FENWOOD LANE
City-St-Zip: PALM COAST, FL 32137

Title: MGRM () Delete
Name: WHELAN, JEFFREY
Address: 5 FENWOOD LANE
City-St-Zip: PALM COAST, FL 32137

Title: MGRM () Delete
Name: MEREDITH, RICHARD
Address: 5 FENWOOD LANE
City-St-Zip: PALM COAST, FL 32137

Title: MGRM () Delete
Name: WHELAN, JAMES H JR
Address: 5 FENWOOD LANE
City-St-Zip: PALM COAST, FL 32137

Title: MGRM () Delete
Name: WHELAN, JOHN
Address: 5 FENWOOD LANE
City-St-Zip: PALM COAST, FL 32137

ADDITIONS/CHANGES:

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:

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JAMES H WHELAN SR

PRES

04/24/2008

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