

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000043633

FILED
May 01, 2009
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:

21 WELLESLEY LANE
PALM COAST, FL 32164

Current Mailing Address:

5 FENWOOD LANE
PALM COAST, FL 32137

New Mailing Address:

21 WELLESLEY LANE
PALM COAST, FL 32164

FEI Number: 20-0129937 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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:

WHELAN, JAMES H SR.
21 WELLESLEY LANE
PALM COAST, FL 32164 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: JAMES H WHELAN SR

05/01/2009

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: MGRM (X) Change () Addition
Name: WHELAN, JAMES H JR
Address: 21 WELLESLEY LANE
City-St-Zip: PALM COAST, FL 32164

Title: MGRM (X) Change () Addition
Name: WHELAN, JOHN
Address: 21 WELLESLEY LANE
City-St-Zip: PALM COAST, FL 32164

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

05/01/2009

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