


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 05, 2008 8:00 am
Secretary of State

05-05-2008 90032 007 ***138.75

DOCUMENT # L03000046313 1. Entity Name JOSHUA NYE PAINTING L.L.C.					
Principal Place of Business 3216 UNDERHILL CT. ORLANDO, FL 32803			Mailing Address 3216 UNDERHILL CT. ORLANDO, FL 32803		
2. Principal Place of Business - No P.O. Box # 710 S Bumby Ave <small>Suite, Apt. #, etc.</small>		3. Mailing Address 710 S Bumby Ave <small>Suite, Apt. #, etc.</small>			
City & State Orlando, FL		City & State Orlando, FL		4. FEI Number 58-2678014	
Zip 32803		Country Orange		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent NYE, JOSHUA 3216 UNDERHILL CT. ORLANDO, FL 32803				7. Name and Address of New Registered Agent Name Joshua Nye Street Address (P.O. Box Number is Not Acceptable) 710 S Bumby Ave City Orlando FL Zip Code 32803	
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Joshua L. Nye Joshua L. Nye DATE 4/30/08 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR NYE, JOSHUA L 3216 UNDERHILL CT. ORLANDO, FL 32803	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR Joshua L. Nye 710 S Bumby Ave Orlando, FL 32803
		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Joshua L. Nye Joshua L. Nye DATE 4/30/08 321-297-8745 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>					