


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 02, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000047417	
1. Entity Name GLENN DRYWALL INSTALLATION, LLC	

Principal Place of Business 52 NW MEMORIAL PARKWAY FORT WALTON BEACH, FL 32548 US	Mailing Address 52 NW MEMORIAL PARKWAY FORT WALTON BEACH, FL 32548 US
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DO NOT WRITE IN THIS SPACE



01272005No Chg-LLC

CR2E083 (10/03)

4. FEI Number 20-0420452	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent GLENN, TIMOTHY J 52 NW MEMORIAL PARKWAY FORT WALTON BEACH, FL 32548

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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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GLENN, TIMOTHY J 52 NW MEMORIAL PARKWAY FORT WALTON BEACH, FL 32548
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Timothy J. Glenn *Timothy J. Glenn* 01/29/05 950-582-6827
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #