2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000048244

Entity Name: M.T.M. PAINTING, LLC

Name:

Address:

City-St-Zip:

KEY, JIMMY RAY

5062 SW 62ND AVE

OCALA, FL 34482 US

FILED May 01, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 7710 S.W. 82ND STREET 7715 S.W. 82ND STREET OCALA, FL 34476 OCALA, FL 34476 **Current Mailing Address: New Mailing Address:** 7715 S.W. 82ND STREET OCALA, FL 34476 FEI Number: 20-0428509 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: Name and Address of New Registered Agent: BARNES & JAMES, P.A 2629 BLAIR STONE ROAD TALLAHASSEE, FL 32301 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGR Title: () Change () Addition () Delete MCELROY, MICHAEL J Name: Name: Address: 7715 S.W. 82ND STREET Address: City-St-Zip: OCALA, FL 34476 US City-St-Zip: Title: MGRM (X) Delete Title: () Change () Addition Name: KRAMER, ROBERT H JR Name: Address: 5062 N.W. 62ND AVE. Address: City-St-Zip: OCALA, FL 34482 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition MCELROY, YVONNE Name: Name: Address: 7715 S.W. 82ND STREET Address: City-St-Zip: OCALA, FL 34476 US City-St-Zip: (X) Change () Addition Title: MGRM () Delete Title: MGRM

I hereby certify that the information supplied with this filing does not qualify for the 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.

Name:

Address:

City-St-Zip:

KEY, JIMMY R

5062 SW 62ND AVE

OCALA, FL 34482 US

SIGNATURE: YVONNE MCELROY MGRM 05/01/2006