## 2008 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

## May 15, 2008 8:00 am Secretary of State **DOCUMENT # L03000048302** 05-15-2008 90077 047 \*\*\*139.00 1. Entity Name RC DRYWALL, LLC Principal Place of Business Mailing Address 60041454 142 LOIZOS DRIVE 142 LOIZOS DRIVE FORT WALTON BEACH, FL 32548 FORT WALTON BEACH, FL 32548 04252008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 05-0591265 Not Applicable \$5.00 Additional 5. Certificate of Status Desired $\Box$ Fee Required 6. Name and Address of Current Registered Agent CHAPPELEAR, ROBERT T DO NOT WRITE 142 LOIZOS DRIVE FORT WALTON BEACH, FL 32548 IN THIS SPACE 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, typed or printed name of registered agent and the if appreciable, (NOTE: Repistered Agent signature required when reinstation) DATE FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS TITLE NAME CHAPPELEAR, ROBERT T STREET ADDRESS 142 LOIZOS DR. CITY-ST-ZIP FORT WALTON BEACH, FL 32548 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-7IP

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.

**FILED**