

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000049233

FILED
Apr 27, 2005
Secretary of State

Entity Name: PHIL'S PRESSURE CLEANING AND PAINTING, LLC

Current Principal Place of Business:

5131 12 AVE S
GULFPORT, FL 33707

New Principal Place of Business:

Current Mailing Address:

5131 12 AVE S
GULFPORT, FL 33707

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

METIVIER, PHILLIP A
5131 12 AVE S
GULFPORT, FL 33707 US

Name and Address of New Registered Agent:

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/MEMBERS:

Title: MGR () Delete
Name: METIVIER, PHILLIP A
Address: 5131 12 AVE S
City-St-Zip: GULFPORT, FL 33707

Title: MGRM () Delete
Name: METIVIER, MELVA J
Address: 5131 12 AVE S
City-St-Zip: GULFPORT, FL 33707

Title: MGRM () Delete
Name: FIGARD, ANGEL K
Address: 12642 81ST AVE NORTH
City-St-Zip: SEMINOLE, FL 33776

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PHILLIP A METIVIER

MGR

04/27/2005

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