


**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jul 07, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L03000052482</b> 1. Entity Name <b>MAJESTIC PAINTING LLC</b>	
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Principal Place of Business <b>3213 NE 14TH AVE OCALA, FL 34479 US</b>	Mailing Address <b>3213 NE 14TH AVE OCALA, FL 34479 US</b>
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**DO NOT WRITE IN THIS SPACE**



07012006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number <b>27-0074129</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent  <b>NAGLE, MICHAEL C JR 3213 NE 14TH AVE OCALA, FL 34479</b>
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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: <u><i>Michael C Nagle Jr</i></u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small>	DATE: <u>7/5/06</u>

**Filing Fee is \$50.00  
Due by September 6, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR NAGLE, MICHAEL C JR 3213 NE 14TH AVE OCALA, FL 34479
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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: <u><i>Michael C Nagle Jr</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	DATE: <u>7/5/06</u> <small>Date Daytime Phone #</small>