

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**Apr 22, 2005 08:00 AM
Secretary of State**

DOCUMENT # L03000052576

1. Entity Name
GREGG'S MOBILE GLASS & MIRROR SERVICE, LLC



Principal Place of Business
**817 RIVA LANE
SARASOTA, FL 34243 US**

Mailing Address
**817 RIVA LANE
SARASOTA, FL 34243 US**



04182005No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 43-2043953	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

5. Name and Address of Current Registered Agent

**MILLER, PAUL
817 RIVA LANE
SARASOTA, FL 34243**

**DO NOT WRITE
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 _____

Signature, typed or printed name of registered agent and title if applicable.

(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 MILLER, PAUL G 817 RIVA LANE SARASOTA, FL 34243
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04/22/05-80090-017 50.00

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IN THIS SPACE**

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: *Paul Miller* **PAUL MILLER** **4-19-05 (941) 755-9931**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #