

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000052745

FILED
Apr 30, 2008
Secretary of State

Entity Name: MIKE'S PAINT & REPAIR SERVICE LLC

Current Principal Place of Business:

41 ALAN DR
APALACHICOLA, FL 32320

New Principal Place of Business:

60 HATHCOCK RD
APALACHICOLA, FL 32320

Current Mailing Address:

41 ALAN DR
APALACHICOLA, FL 32320

New Mailing Address:

60 HATHCOCK RD
APALACHICOLA, FL 32320

FEI Number: 36-4546194

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRIDGEN, MICHAEL A JR
41 ALAN DR
APALACHICOLA, FL 32320 US

Name and Address of New Registered Agent:

PRIDGEN, MICHAEL A JR
60 HATHCOCK RD
APALACHICOLA, FL 32320 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: MICHAEL A PRIDGEN, JR

04/30/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PRIDGEN, MICHAEL A JR
Address: 41 ALAN DR
City-St-Zip: APALACHICOLA, FL 32320

Title: MGRM (X) Delete
Name: ARD, JEREMIAH
Address: OLD FERRY DOCK RD
City-St-Zip: EASTPOINT, FL 32320

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: PRIDGEN, MICHAEL A JR
Address: 60 HATHCOCK RD
City-St-Zip: APALACHICOLA, FL 32320

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

SIGNATURE: MICHAEL A. PRIDGEN, JR

MGRM

04/30/2008

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