### 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

#### **DOCUMENT # L03000055760**

1. Entity Name

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-S7-ZIP

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS CITY-ST-ZIP ---

WALTER MOORE CONCRETE COATING, LLC



Principal Place of Business

Mailing Address

1737 VERONICA S. SHOEMAKER BLVD. FORT MYERS, FL 33916 US 1737 VERONICA S. SHOEMAKER BLVD. FORT MYERS, FL 33916 US

### FILED Mar 03, 2008 08:00 A Secretary of State



01222008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 77-0618055

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MOORE, WALTER 1737 VERONICA S. SHOEMAKER BLVD. FORT MYERS, FL 33916

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	named entity submits this statement for the purpose of chaions of registered agent.	nging its registered office or registered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE
After May	NOWILL FEE IS \$138.75 / 1, 2008 Fee will be \$538.75	<u></u>	U00000846611 03/18/08-80036-008 138.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MOORE, WALTER 1737 VERONICA S. SHOEMAKER BLVD. FORT MYERS, FL 33916	,	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		:	
TITLE			

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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: Walter Moore, WALTER MOORE 2-29-08

239-332-3573

ING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #