

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000056447

FILED  
May 01, 2009  
Secretary of State

**Entity Name:** ALL DAY & NIGHT PLUMBING, LLC

**Current Principal Place of Business:**

208 FRANCES MAPLES DRIVE  
TALLAHASSEE, FL 32310

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 6634  
TALLAHASSEE, FL 323146634

**New Mailing Address:**

**FEI Number:** 57-1195991      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

GIOVANNONI, JOHN M.S. EACMAAB  
3030 JUNIPER DRIVE  
EDGEWATER, FL 321416208 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/MANAGERS:**

Title: MGR ( ) Delete  
Name: BENNETT, CARL  
Address: PO BOX 6634  
City-St-Zip: TALLAHASSEE, FL 323146634

**ADDITIONS/CHANGES:**

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: CARL O. BENNETT

MGR

05/01/2009

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