

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 03, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000057036

1. Entity Name:
RODNEY'S PAINTING & PRESSURE CLEANING, LLC



Principal Place of Business
1103 NE 21ST TERR.
OCALA, FL 34470

Mailing Address
1103 NE 21ST TERR.
OCALA, FL 34470



08012005 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0528433

Applied For
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

BUCHALLA, C. RODNEY
1103 NE 21ST TERR.
OCALA, FL 34470

**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 September 7, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
BUCHALLA, C. RODNEY
1103 NE 21ST TERR
OCALA, FL 34470

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
BUCHALLA, DONNA R
1103 NE 21ST TERR
OCALA, FL 34470

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
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: C. RODNEY BUCHALLA

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

8-1-05

Date

352 6226979

Daytime Phone #