

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000000074

FILED
Aug 02, 2004
Secretary of State

Entity Name: GUTTER TOPPER OF NORTH FLORIDA & HOME REPAIR, LLC

Current Principal Place of Business:

4102 N.W. 21ST DRIVE
GAINESVILLE, FL 32605

New Principal Place of Business:

510 NW 98TH STREET
GAINESVILLE, FL 32607

Current Mailing Address:

4102 N.W. 21ST DRIVE
GAINESVILLE, FL 32605

New Mailing Address:

510 NW 98TH STREET
GAINESVILLE, FL 32607

FEI Number: 56-2072301

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OVERMAN, LEO JOSEPH
4102 N.W. 21ST DRIVE
GAINESVILLE, FL 32605

Name and Address of New Registered Agent:

OVERMAN, LEO JOSEPH
510 NW 98TH STREET
GAINESVILLE, FL 32607

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: _____

08/02/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: GUTTER TOPPER OF N., FLORIDA & HOME REPAIR,
Address: 510 NW 98TH STREET
City-St-Zip: GAINESVILLE, FL 32607

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LEO JOESPH OVERMAN

MGRM

08/02/2004

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