

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000002222

FILED
Mar 20, 2009
Secretary of State

Entity Name: JOSEPH SHOFFNER PAINTING LLC

Current Principal Place of Business:

5534 HWY 393
CRESTVIEW, FL 32539

New Principal Place of Business:

Current Mailing Address:

5534 HWY 393
CRESTVIEW, FL 32539

New Mailing Address:

FEI Number: 71-0957857

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHOFFNER, JOSEPH
5534 HWY 393
CRESTVIEW, FL 32539 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: MGMR () Delete
Name: SHOFFNER, JOSEPH
Address: 5534 HWY 393
City-St-Zip: CRESTVIEW, FL 32539

Title: MGMR () Delete
Name: ADAMS, CECIL
Address: 5534 HWY 393
City-St-Zip: CRESTVIEW, FL 32539

Title: MGMR () Delete
Name: EDMONDSON, TRAVIS
Address: 5534 HWY 393
City-St-Zip: CRESTVIEW, FL 32539

ADDITIONS/CHANGES:

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

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

Title: MGMR (X) Change () Addition
Name: OGLESBY, CHRISTOPHER
Address: 2149 EAST THIRD AVE
City-St-Zip: CRESTVIEW, FL 32539

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: JOSEPH SHOFFNER

MGRM

03/20/2009

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