## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## Apr 24, 2008 08:00 AM Secretary of State DOCUMENT # L04000004465 1. Entity Name H & M PAINTING L.L.C. Principal Place of Business Mailing Address 109 DRIFTWOOD ROAD P.O. BOX 6452 SUITE 202 MIRMAR BEACH, FL 32550 US MIRMAR BEACH, FL 32550 01162008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3678826 Not Applicable \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent FEASTER, HOWARD DO NOT WRITE 109 DRIFTWOOD ROAD **SUITE 202** IN THIS SPACE MIRMAR BEACH, FL 32550 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. you and SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 U00000920S26 05/14/08-80047-014 143.75 MANAGING MEMBERS/MANAGERS 9. DITLE MGRM NAME FEASTER, HOWARD STREET ADDRESS 109 DRIFTWOOD ROAD SUITE 202 MIRAMAR BEACH, FL 32550 CITY-ST- 7P TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-7IP THUE IN THIS SPACE NAME STREET ADDRESS CITY-ST-7iP TOTALE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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: HOWAND FEASTER

CITY-ST-ZIP

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Daytime Phone #

**FILED**