

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000007374

**FILED**  
**May 01, 2006**  
**Secretary of State**

**Entity Name:** DARRELL BELL PAINTING, LLC

**Current Principal Place of Business:**

PO BOX 17505  
PENSACOLA, FL 32522

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 17505  
PENSACOLA, FL 32522

**New Mailing Address:**

**FEI Number:** 20-0822028      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
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:**

ROCKWELL ACCOUNTING, LLC  
9015 BOWMAN AVE  
PENSACOLA, FL 32534    US

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

ROCKWELL ACCOUNTING, LLC  
912 W MICHIGAN AVE  
PENSACOLA, FL 32505    US

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:** CEREZA ROCKWELL

05/01/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM      ( ) Delete  
**Name:** BELL, DARRELL E  
**Address:** PO BOX 17505  
**City-St-Zip:** PENSACOLA, FL 32522

**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 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:** DARRELL BELL

MGRM

05/01/2006

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