2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 21, 2008 08:00 All Secretary of State **DOCUMENT # L04000007439** 1. Entity Name D & D DRYWALL SPECIALTIES "L.L.C." Mailing Address Principal Place of Business 281 CEDAR AVENUE 281 CEDAR AVENUE NICEVILLE, FL 32578 NICEVILLE, FL 32578 04022008No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number Not Applicable 59-3514578 \$5.00 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent DO NOT WRITE DECKER, DONALD L 281 CEDAR AVENUE NICEVILLE, FL 32578 IN THIS SPACE 6. 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 (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 <u> U000000907960</u> MANAGING MEMBERS/MANAGERS 9. TITLE DECKER, DONALD NAME STREET ADDRESS 281 CEDAR AVE CiTY-ST-7IP NICEVILLE, FL 32578 TITLE NAME DECKER, SHARON STREET ADDRESS 281 CEDAR AVENUE CITY-ST-ZIP NICEVILLE, FL 32578 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME

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: SHOWN SIGNATURE AND TYPED OR PRINTED NAME OF BIGINNO MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

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Date

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STREET ADDRESS CITY+ST-ZIP