2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000008380

1. Entity Name

LESTER L WHITFIELD PAINTING LLC

FILED Jan 31, 2007 08:00 AM **Secretary of State**

Principal Place of Business

4757 POPLARHEAD CHURCH ROAD

HOLT, FL 32564

Mailing Address

4757 POPLARHEAD CHURCH ROAD

HOLT, FL 32564



01222007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number NOT APPLICABLE

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

WHITFIELD, LESTER L 4757 POPLARHEAD CHURCH ROAD HOLT, FL 32564

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5. The above the obligat	named entity submits this statement for the purpose of char flons of registered agent.	nging its registered office or registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept			
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable	(NOTE, Registered Agent signature required when reinstating)	CATE			
Filing Fee is \$50.00 Due by May 1, 2007			U00000614303 02/06/07-80020-018 50.00			
9.	MANAGING MEMBERS/MANAGERS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WHITFIELD, LESTER L 4757 POPLARHEAD CHURCH ROAD HOLT, FL 32564					
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP						

11. I hereby certify that the information supplied with this filling 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 flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:	Lento	& Albithat	/	Lester	h.	W
SIGNATURE	AND TYPED OR P	RINTED NAME OF SIGNING	MANAGING MEMBE	R, OR AUTHORIZED	REPRES	ENTATIV

TITLE NAME STREET ADDRESS CITY-ST-ZIP