

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000008916

Entity Name: JOEL WELLS PAINTING, LLC

FILED
Apr 27, 2005
Secretary of State

Current Principal Place of Business:

1449 WELLS ROAD
BONIFAY, FL 32425

New Principal Place of Business:

Current Mailing Address:

1449 WELLS ROAD
BONIFAY, FL 32425

New Mailing Address:

FEI Number: 77-0622367

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WELLS, JOEL DENNIS
1449 WELLS ROAD
BONIFAY, FL 32425 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/MEMBERS:

Title: MGRM () Delete
Name: WELLS, JOEL DENNIS
Address: 1449 WELLS ROAD
City-St-Zip: BONIFAY, FL 32425

Title: MGRM (X) Delete
Name: WELLS, JOEL DENNIS JR.
Address: 1449 WELLS ROAD
City-St-Zip: BONIFAY, FL 32425

Title: MGRM (X) Delete
Name: STUBBS, MICHAEL R
Address: 3525 ROSCOE RD.
City-St-Zip: VERNON, FL 32462

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WELLS, JOEL DENNIS
Address: 1449 WELLS ROAD
City-St-Zip: BONIFAY, FL 32425 US

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

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 Section 119.07(3)(i), 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: JOEL DENNIS WELLS

MGRM

04/27/2005

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