2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000008979

1. Entity Name

ANTHONY'S WALLPAPER & PAINTING, LLC



FILED Apr 10, 2008 08:00 A Secretary of State

Principal Place of Business

43 JUSTIN DRIVE APOPKA, FL 32712 Mailing Address

43 JUSTIN DRIVE APOPKA, FL 32712



DO NOT WRITE IN THIS SPACE

03242008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 36-4549166

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BISKNER, ANTHONY G 43 JUSTIN DRIVE APOPKA, FL 32712 DO NOT WRITE IN THIS SPACE

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.	

SIGNATURE.

Signature, typed or printed name of registered agent and little if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 U00000890377 04/22/08-80092-012 138.75

9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PST BISKNER, ANTHONY G 43 JUSTIN DRIVE APOPKA, FL 32712		
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11. I hereby certify that the information supplied with this filing does not qualify for the exi			

DO NOT WRITE IN THIS SPACE

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: Anthony G. Biskner

4-7-08

407 -221-4257

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Dat**e**

Daytime Phone #