2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

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

DOCUMENT # L04000015594

1. Entity Name

LANGFORD DRYWALL, LLC



Principal Place of Business

522 S. MONTGOMERY AVE DELAND, FL 32720 Mailing Address

522 S. MONTGOMERY AVE DELAND, FL 32720 FILED Sep 05, 2008 08:00 AM Secretary of State



07172008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number NOT APPLICABLE Applied For Not Applicable

5. Certificate of Status Desired

\$5.0

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

LANGFORD, BRYAN R 522 S. MONTGOMERY AVE DELAND, FL 32720

SIGNATURE:

DO NOT WRITE IN THIS SPACE

8-28-08

Oavtime Phone #

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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 title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE		
FILE NOWIII FEE IS \$138.75 In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.		
9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LANGFORD, BRYAN R 522 S. MONTGOMERY AVE DELAND, FL 32720	U00000959139 09/05/08-80004-008 143.75
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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.		