

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000021098

Entity Name: CLEAN WINDOWS, LLC

FILED  
Apr 20, 2009  
Secretary of State

## Current Principal Place of Business:

352 WOODVALE DRIVE  
VENICE,, FL 34293 US

## New Principal Place of Business:

352 WOODVALE DRIVE  
VENICE, FL 34293 US

## Current Mailing Address:

352 WOODVALE DRIVE  
VENICE,, FL 34293 US

## New Mailing Address:

352 WOODVALE DRIVE  
VENICE, FL 34293 US

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEBOFSKY, DAVID H  
352 WOODVALE DRIVE  
VENICE, FL 34293 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/MANAGERS:

Title: MGR ( ) Delete  
Name: LEBOFSKY, DAVID H  
Address: 352 WOODVALE DRIVE  
City-St-Zip: VENICE, FL 34293

Title: MGRM ( ) Delete  
Name: LEBOFSKY, SALLY A  
Address: 352 WOODVALE DRIVE  
City-St-Zip: VENICE, FL 34293

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: LEBOFSKY, DAVID H  
Address: 352 WOODVALE DRIVE  
City-St-Zip: VENICE, FL 34293 US

Title: MGRM (X) Change ( ) Addition  
Name: LEBOFSKY, SALLY A  
Address: 352 WOODVALE DRIVE  
City-St-Zip: VENICE, FL 34293 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: DAVID H. LEBOFSKY

MGR

04/20/2009

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