

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000026970

FILED  
Jan 07, 2008  
Secretary of State

Entity Name: MIKE LOUDY PAINTING, L.L.C.

**Current Principal Place of Business:**

13090 HARRISON ST.  
BROOKSVILLE, FL 34613

**New Principal Place of Business:**

**Current Mailing Address:**

13090 HARRISON ST.  
BROOKSVILLE, FL 34613

**New Mailing Address:**

FEI Number: 59-3056530

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ALL FLORIDA FIRM, INC.  
465 S. VILUSIA AVE.  
SUITE C  
ORANGE CITY, FL 32763 US

**Name and Address of New Registered Agent:**

ALL FLORIDA FIRM, INC.  
813 DELTONA BLVD  
SUITE A  
DELTONA, FL 32725 US

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: VICTOR M ERWIN

01/07/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: LOUDY, MICHAEL  
Address: 5404 FRONT DRIVE  
City-St-Zip: HOLIDAY, FL 34690  
  
Title: MGR ( ) Delete  
Name: GARRY, MACKEY  
Address: 10642 SHALIMAR STREET  
City-St-Zip: NEW PORT RICHEY, FL 34654

**ADDITIONS/CHANGES:**

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 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: MIKE LOUDY

P

01/07/2008

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