

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000036442

FILED
Apr 17, 2009
Secretary of State

Entity Name: PARADIGM DECORATIVE CONCRETE LLC

Current Principal Place of Business:

102 OAKHILL AVE
FT WALTON BEACH, FL 32547

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3274
FT WALTON BEACH, FL 32547

New Mailing Address:

102 OAKHILL AVE
FT WALTON BEACH, FL 32547

FEI Number: 73-1704703

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILDER, JAMES R
102 OAKHILL AVE
FT WALTON BEACH, FL 32547 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: MGRM () Delete
Name: JIM WILDER AND ASSOCIATES, LLC
Address: P.O. BOX 3274
City-St-Zip: FT WALTON BEACH, FL 32547

Title: MGR () Delete
Name: WILDER, ANDREW J
Address: P.O. BOX 5429
City-St-Zip: PASADENA, TX 77508

Title: MGR () Delete
Name: KITTERMAN, JOE
Address: P.O. BOX 5429
City-St-Zip: PASADENA, TX 77508

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: JIM WILDER AND ASSOCIATES, LLC
Address: 102 OAKHILL AVE
City-St-Zip: FT WALTON BEACH, FL 32547

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: JAMES R WILDER

MGRM

04/17/2009

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