

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000054510

**FILED**  
**Feb 08, 2007**  
**Secretary of State**

**Entity Name:** PANHANDLE INTERIOR CONTRACTORS, LLC

**Current Principal Place of Business:**

1703 15TH STREET  
NICEVILLE, FL 32578

**New Principal Place of Business:**

2038 HWY 177  
BONIFAY, FL 32425

**Current Mailing Address:**

P. O. BOX 1783  
NICEVILLE, FL 32588

**New Mailing Address:**

P.O. BOX 412  
BONIFAY, FL 32425

**FEI Number:** 20-1412446

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RONE, TOMMY W  
1703 15TH STREET  
NICEVILLE, FL 32578 US

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

RONE, TOMMY W  
2038 HWY 177  
BONIFAY, FL 32425 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: TOMMY W. RONE

02/08/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: RONE, TOMMY W  
Address: 1703 15TH STREET  
City-St-Zip: NICEVILLE, FL 32578

**ADDITIONS/CHANGES:**

Title: MNGR (X) Change ( ) Addition  
Name: RONE, TOMMY W  
Address: P.O. BOX 412  
City-St-Zip: BONIFAY, FL 32425

I hereby certify that the information supplied with this filing does not qualify for the 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: TOMMY W. RONE

MNGR

02/08/2007

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