

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000054510

FILED  
Feb 05, 2009  
Secretary of State

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

**Current Principal Place of Business:**

2038 HWY 177  
BONIFAY, FL 32425

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 412  
BONIFAY, FL 32425

**New Mailing Address:**

2038 HWY 177  
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  
2038 HWY 177  
BONIFAY, FL 32425 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: MNGR ( ) Delete  
Name: RONE, TOMMY W  
Address: P.O. BOX 412  
City-St-Zip: BONIFAY, FL 32425

**ADDITIONS/CHANGES:**

Title: MNGR (X) Change ( ) Addition  
Name: RONE, TOMMY W  
Address: 2038 HWY 177  
City-St-Zip: BONIFAY, FL 32425

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:** TOMMY W. RONE

MNGR

02/05/2009

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