

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000073570

FILED
May 16, 2008
Secretary of State

Entity Name: 1ST CHOICE PAINTING, L.L.C.

Current Principal Place of Business:

12224 LYNDELL PLANTATION DRIVE
PANAMA CITY BEACH, FL 32413

New Principal Place of Business:

Current Mailing Address:

12224 LYNDELL PLANTATION DRIVE
PANAMA CITY BEACH, FL 32411

New Mailing Address:

12224 LYNDELL PLANTATION DRIVE
PANAMA CITY BEACH, FL 32413

FEI Number: 02-0731693 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SUMMERS, MATTHEW JUSTIN
12224 LYNDELL PLANTATION DRIVE
PANAMA CITY BEACH, FL 32413 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: FRANKLIN, JACK ROSS
Address: 6028 PRIDGEN
City-St-Zip: PANAMA CITY, FL 32404

Title: MGRM () Delete
Name: FRANKLIN, JAMES E
Address: 12224 LYNDELL PLANTATION DRIVE
City-St-Zip: PANAMA CITY BEACH, FL 32413

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: JACK ROSS FRANKLIN

MGRM

05/16/2008

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