## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

## May 08, 2006 8:00 am Secretary of State DOCUMENT # L04000075828 05-08-2006 90041 047 \*\*\*\*50.00 1. Entity Name TAMMY AYCOCK PAINTING, LLC. Principal Place of Business 21909 BELGRADE AVE PANAMA CITY BEACH FL 32413 21909 BELGRADE AVE PANAMA CITY BEACH FL 32413 1st MOORE CR2E083 (10/05) 4. FEI Number Applied For 38-3717009 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent AYCOCK, TAMMY B 21909 BELGRADE AVE PANAMA CITY BEACH FL 32413 8. 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. I am familiar with, and accept the obligations of registered agent (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2006 MANAGING MEMBERS/MANAGERS 10. TITLE MGRM ☐ Detete Addition michael A. Sutton 324, 21909 Beigrade Ave 7.(,B. 7 Passion Painting LL NAME AYCOCK, TAMMY B NAME STREET ADDRESS 21909 BELGRADE AVE. STREET ADDRESS CITY-ST-ZIP PANAMA CITY BEACH FL 32413 CITY-ST-ZIP TITLE nichael A. Sutton ☐ Delete TITLE NAME NAME 21909 Beigrade AUC anana lity Beach T STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP THIE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY - ST - ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.

FILED