

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT (AR) - DUE BY MAY 1, 2008**

FILED
May 13, 2008 8:00 am
Secretary of State

05-13-2008 90067 028 ***143.75

DOCUMENT # L04000079815

1. Entity Name

M & N HOME IMPROVEMENT OF PCB LLC



Principal Place of Business

9213 FAITH LANE
PANAMA CITY BEACH FL 32408
US

Mailing Address

9213 FAITH LANE
PANAMA CITY BEACH FL 32408
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E083 (10/07)

4. FEI Number

74-3133647

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

MATTHEWS, JERRY
9213 FAITH LANE
PANAMA CITY BEACH FL 32408

DELETE

7. Name and Address of New Registered Agent

Name **RYAN JASON MATTHEWS**

Street Address (P.O. Box Number is Not Acceptable)

9213 FAITH LANE

City **PANAMA CITY BEACH**

FL

Zip Code **32408**

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.

SIGNATURE

RYAN JASON MATTHEWS

Ryan Jason Matthews

04-24-08

DATE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent Signature is required when rotating)

FILE NOW!!! FEE IS \$138.75

After May 1, 2008, Fee Will Be \$538.75

Make Check Payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE **MGRM** ☒ Delete
NAME **MATTHEWS, JERRY**
STREET ADDRESS **9213 FAITH LANE**
CITY-ST-ZIP **PANAMA CITY BEACH FL 32408**

TITLE **MGRM** ☐ Delete
NAME **MATTHEWS, RYAN JASON**
STREET ADDRESS **9213 FAITH LANE**
CITY-ST-ZIP **PANAMA CITY BEACH FL 32408**

TITLE **MGRM** ☒ Delete
NAME **MATTHEWS, LUELLA FAY**
STREET ADDRESS **9213 FAITH LANE**
CITY-ST-ZIP **PANAMA CITY BEACH FL 32408**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE **MGRM** ☐ Change ☒ Addition
NAME **ALBIEN JOHN BRADBURY**
STREET ADDRESS **9213 FAITH LANE**
CITY-ST-ZIP **PANAMA CITY BEACH, FL. 32408**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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.

SIGNATURE: **RYAN JASON MATTHEWS**

Ryan Jason Matthews

04-24-08

DATE

850-523-8658

Corporate Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE