2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Mar 20, 2006 08:00 AM Secretary of State **DOCUMENT # L04000091055** BARNES PAINTING LLC Principal Place of Business Mailing Address 1725 CURRYVILLE ROAD 890 BRUMLEY RD CHULUOTA, FL 32766 CHULUOTA, FL 32766 CR2E083 (11/05) 03152006 No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-2019374 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE BARNES, CHRIS S SR 1725 CURRYVILLE ROAD CHULUOTA, FL 32766 IN THIS SPACE 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 regis 3/16/66 SIGNATURE. (NOTE: Registered Agent signature required when reinstalling) Filing Fee Is \$50.00 Due by May 1, 2006 MANAGING MEMBERS/MANAGERS 9. MGR TITLE BARNES, CHRIS S SR NAME 1725 CURRYVILLE ROAD STREET ADDRESS U00000474833 04/04/06-80036-021 50.00 CITY-\$1-ZIP CHULUOTA, FL 32766 MGR BARNES, TOMMY NAME STREET ADDRESS 890 BRUMLEY ROAD CITY-ST-ZIP CHULUOTA, FL 32766 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is take 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 of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED N OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-202

Daytime Phone #