

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

**FILED**  
**Apr 12, 2005 8:00 am**  
**Secretary of State**

04-12-2005 90012 004 \*\*\*\*50.00

DOCUMENT # L04000092794

1. Entity Name

TONY'S PAINTING, LLC



Principal Place of Business

7813 N. LAGOON DRIVE  
UNIT 7C  
PANAMA CITY BEACH FL 32417

Mailing Address

P.O. BOX 18455  
PANAMA CITY BEACH FL 32417



2. Principal Place of Business

5812 BEACH DRIVE  
Suite, Apt. #, etc.  
UNIT B

3. Mailing Address

5812 BEACH DRIVE  
Suite, Apt. #, etc.  
UNIT B

1st MOORE

CR2E083 (10/04)

City & State

PANAMA CITY BEACH, FL

City & State

PANAMA CITY BEACH, FL

Zip

32408

Country

FLA

Zip

32408

Country

FLA

4. FEI Number

☒ Applied For  
☐ Not Applicable

5. Certificate of Status Desired

☐ \$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

SILVA, ANTONIO CUNHA  
7813 N. LAGOON DRIVE  
UNIT 7C  
PANAMA CITY BEACH FL 32417

7. Name and Address of New Registered Agent

Name  
ANTONIO C. SILVA  
Street Address (P.O. Box Number is Not Acceptable)

5812 BEACH DRIVE UNIT B  
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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$50.00**

**Make Check Payable to Florida Department of State**

**Due By May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM ☐ Delete  
NAME SILVA, ANTONIO CUNHA  
STREET ADDRESS 7813 N. LAGOON DRIVE, UNIT 7C  
CITY-ST-ZIP PANAMA CITY BEACH FL 32417

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 SILVA, ANTONIO CUNHA  
STREET ADDRESS 5812 BEACH DRIVE, UNIT B  
CITY-ST-ZIP PANAMA CITY BEACH FL 32408

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

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

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

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 exemption stated in Section 119.07(3)(i), 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:

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

Date

Daytime Phone #

04.07.05