

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000031782

FILED
Jan 11, 2008
Secretary of State

Entity Name: OLDE NAPLES PAINTING COMPANY, LLC

Current Principal Place of Business:

1220 ELEVENTH STREET NORTH
NAPLES, FL 34102

New Principal Place of Business:

1235 RESERVE WAY
102
NAPLES, FL 34105

Current Mailing Address:

1220 ELEVENTH STREET NORTH
NAPLES, FL 34102

New Mailing Address:

1235 RESERVE WAY
102
NAPLES, FL 34105

FEI Number: 20-2597401

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WOOD, DOUGLAS A
1000 TAMiami TRIAL NORTH
SUITE 201
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

WOOD, DOUGLAS A
1000 TAMiami TRIAL NORTH
SUITE 401
NAPLES, FL 34102 US

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:

01/11/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: CRAIG, DANIEL
Address: 1220 ELEVENTH STREET NORTH
City-St-Zip: NAPLES, FL 34102

Title: MGR (X) Delete
Name: DEPUYE, EDWARD M
Address: 212 FAIRWAY CIRCLE
City-St-Zip: NAPLES, FL 34110

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: DEPUYE, EDWARD M
Address: 1235 RESERVE WAY #102
City-St-Zip: NAPLES, FL 34105

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: EDWARD M. DEPUYE

MGR

01/11/2008

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