


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**Feb 06, 2008 08:00 AM
Secretary of State**

DOCUMENT # L05000034540 1. Entity Name PATRICK HAGAN PAINTING, LLC	
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Principal Place of Business 450 EAST THELMA STREET LAKE ALFRED, FL 33850	Mailing Address 450 EAST THELMA STREET LAKE ALFRED, FL 33850
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DO NOT WRITE IN THIS SPACE



01282008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-2657089	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent HAGAN, PATRICK 450 EAST THELMA STREET LAKE ALFRED, FL 33850

**DO NOT WRITE
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 registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when renewing) DATE _____

**FILE NOW!!! FEB IS \$138.75
After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HAGAN, PATRICK 450 EAST THELMA STREET LAKE ALFRED, FL 33850
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02/15/08-80013-015 138.75

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 606, Florida Statutes.

SIGNATURE: *Patrick M. Hagan* **02/04/08** **863.5573406**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #