

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000036765

FILED  
Apr 21, 2007  
Secretary of State

Entity Name: PRO FINISHING LLC

**Current Principal Place of Business:**

12065 SHADOW RIDGE BLVD  
HUDSON, FL 34669

**New Principal Place of Business:**

**Current Mailing Address:**

12065 SHADOW RIDGE BLVD  
HUDSON, FL 34669

**New Mailing Address:**

FEI Number: 22-3877716

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DRUM, THOMAS G  
12065 SHADOW RIDGE BLVD  
HUDSON, FL, FL 34669 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: DRUM, THOMAS G  
Address: 12065 SHADOW RIDGE BLVD  
City-St-Zip: HUDSON, FL 34669

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR ( ) Change (X) Addition  
Name: DADDONA, JOEL D  
Address: 9506 GRAY FOX  
City-St-Zip: NEW PORT RICHEY, FL 34667 US

I hereby certify that the information supplied with this filing does not qualify for the 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: THOMAS G DRUM

MGR

04/21/2007

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