


FILED
Jun 13, 2007 8:00 am
Secretary of State

05-10-2007 90421 023 ****50.00

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L05000047897		
1. Entity Name D N R PAINTING, LLC		
Principal Place of Business 6939 E SHADY NOOK CT FLORAL CITY, FL 34436 US		Mailing Address 6939 E SHADY NOOK CT FLORAL CITY, FL 34436 US
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent USACCOUNTING OFFICE, INC 4815 E BUSCH BLVD SUITE 113 TAMPA, FL 33617		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reissuing)</small> DATE _____		
Filing Fee is \$50.00 Due by May 1, 2007		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGRM MUHONEN, DENNIS 6939 E SHADY NOOK CT FLORAL CITY, FL 34436	DO NOT WRITE IN THIS SPACE
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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 608, Florida Statutes.		
SIGNATURE: <u><i>Dennis Muhonen</i></u> <u>6-12-07</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SHOWING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>		

30010652



03232007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
20-2833188

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required