

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000054088

Entity Name: A SPLASH OF COLOR LLC

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

124 SOTRI STREET
FORT WALTON BEACH, FL 32548

New Principal Place of Business:

124 SOTIR STREET
FORT WALTON BEACH, FL 32548

Current Mailing Address:

124 SOTIR
FORT WALTON BEACH, FL 32548

New Mailing Address:

124 SOTIR STREET
FORT WALTON BEACH, FL 32548

FEI Number: 20-2946497

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VACCARI, DANA
124 SOTIR STREET
FORT WALTON BEACH, FL 32548 US

Name and Address of New Registered Agent:

VACCARI, DANA M MGRM
124 SOTIR STREET
FORT WALTON BEACH, FL 32548 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: DANA VACCARI

04/30/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: VACCARI, DANA
Address: 124 SOTIR STREET
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: MGRM () Delete
Name: VACCARI, DIANNE
Address: 127 SOTIR STREET
City-St-Zip: FORT WALTON BEACH, FL 32547

ADDITIONS/CHANGES:

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

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: DANA VACCARI

MGRM

04/30/2009

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