

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000060093

Entity Name: WILLIAM CREEDS CLEANING LLC

FILED
Feb 09, 2009
Secretary of State

Current Principal Place of Business:

711 BERTREND STREET
ENGLEWOOD, FL 34223

New Principal Place of Business:

1081 IOWA AVE
ENGLEWOOD, FL 34223

Current Mailing Address:

711 BERTREND STREET
ENGLEWOOD, FL 34223

New Mailing Address:

1081 IOWA AVE
ENGLEWOOD, FL 34223

FEI Number: 59-3640508

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CREED, WILLIAM K JR
711 BERTREND STREET
ENGLEWOOD, FL 34223 US

Name and Address of New Registered Agent:

CREED, WILLIAM K JR
1081 IOWA AVE
ENGLEWOOD, FL 34223 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:

02/09/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CREED, WILLIAM K JR
Address: 711 BERTREND ST
City-St-Zip: ENGLEWOOD, FL 34223

Title: MGRM () Delete
Name: CREED, PAMELA
Address: 711 BERTREND STREET
City-St-Zip: ENGLEWOOD, FL 34223

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CREED, WILLIAM K JR
Address: 1081 IOWA AVE
City-St-Zip: ENGLEWOOD, FL 34223

Title: MGRM (X) Change () Addition
Name: CREED, PAMELA
Address: 1081 IOWA AVE
City-St-Zip: ENGLEWOOD, FL 34223

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: PAM CREED

MGRM

02/09/2009

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