## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED** Mar 19, 2007 08:00 AM **Secretary of State** 

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1. Entity Name

ALL WEATHER PAINTING & PROTECTIVE COATING LLC



Principal Place of Business

**5910 TROUBLE CREEK ROAD NEW PORT RICHEY, FL 34652**  Mailing Address

5120 WESTSHORE DRIVE NEW PORT RICHEY, FL 34652



DO NOT WRITE IN THIS SPACE

02232007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-3075929

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

TERKEURST, STEVE 5120 WESTSHORE DRIVE NEW PORT RICHEY, FL 34652

## DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the purpose of chailions of registered agent.	nging its registered office or registered agent,	or both, in the State of Florida. I am familiar with, and accept	
SIGNATURE.			,	
Signature, typed or printed name of registered agent and (ille if applicable.		(NOTE Registered Agent signature required when reinstati	10000000 1 105	
	iling Fee is \$50.00 ue by May 1, 2007		03/28/07-80043-004 50.00	
9.	MANAGING MEMBERS/MANAGERS		,	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TERKEURST, STEVE 5120 WESTSHORE DRIVE NEW PORT RICHEY, FL 34652		٠.	
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TITLE NAME STREET ADDRESS		II.		

 I hereby certify that the information s indicated on this report is true and limited liability company or the received. project with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information corrected 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 first trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: '

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

D NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

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