

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000070939

FILED
Apr 23, 2009
Secretary of State

Entity Name: ISLAND COAST DRYWALL AND STUCCO, LLC

Current Principal Place of Business:

17431 ALICO CENTER RD.
UNIT 3
FORT MYERS, FL 33912

New Principal Place of Business:

Current Mailing Address:

17431 ALICO CENTER RD.
UNIT 3
FORT MYERS, FL 33912

New Mailing Address:

FEI Number: 47-0957325

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHUMANN, RAYMOND L
27200 RIVERVIEW CENTER BLVD.
SUITE 103
BONITA SPRINGS, FL 34134 US

Name and Address of New Registered Agent:

SCHUMANN, RAYMOND L
3451 BONITA BAY BLVD.
SUITE 200
BONITA SPRINGS, FL 34134 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:

04/23/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BROWN, WILLIAM A
Address: 17431 ALICO CENTER RD., UNIT 3
City-St-Zip: FORT MYERS, FL 33912

Title: MGRM () Delete
Name: LAYNE, KENNY E
Address: 17431 ALICO CENTER RD.
City-St-Zip: FORT MYERS,, FL 33912

Title: MGRM () Delete
Name: WHITE, J. DAVID
Address: 17431 ALICO CENTER RD.
City-St-Zip: FORT MYERS, FL 33912

Title: MGRM () Delete
Name: BUCK, RICKY A
Address: 17431 ALICO CENTER RD.
City-St-Zip: FORT MYERS, FL 33912

ADDITIONS/CHANGES:

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

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

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: WILLIAM BROWN

M.ME

04/23/2009

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