

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000073232

FILED
Apr 20, 2009
Secretary of State

Entity Name: LIGHTHOUSE PLUMBING, LLC

Current Principal Place of Business:

825 CENTER STREET #49A
JUPITER, FL 33458

New Principal Place of Business:

825 CENTER STREET #12D
JUPITER, FL 33458

Current Mailing Address:

PO BOX 1969
JUPITER, FL 33468

New Mailing Address:

FEI Number: 55-0901402

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZIELINSKI, CHERYL
142 HARBOURSIDE CR
JUPITER, FL 33477 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LINEBAUGH, ROBERT G
Address: 825 CENTER STREET #49A
City-St-Zip: JUPITER, FL 33458

Title: MGRM () Delete
Name: ZIELINSKI, CHERYL
Address: 142 HARBOURSIDE CR
City-St-Zip: JUPITER, FL 33477

Title: MGRM () Delete
Name: ZIELINSKI, GREGORY
Address: 142 HARBOURSIDE CR
City-St-Zip: JUPITER, FL 33477

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LINEBAUGH, ROBERT G
Address: 825 CENTER STREET #12D
City-St-Zip: JUPITER, FL 33458

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: CHERYL ZIELINSKI

MGRM

04/20/2009

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