

# **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000082137

**FILED**  
**Mar 12, 2007**  
**Secretary of State**

**Entity Name:** GREAT LAKES PAINTING LLC

**Current Principal Place of Business:**

665 S. BROADWAY  
ENGLEWOOD, FL 34223

**New Principal Place of Business:**

6344 CONISTON TERRACE  
NORTH PORT, FL 34287

**Current Mailing Address:**

665 S. BROADWAY  
ENGLEWOOD, FL 34223

**New Mailing Address:**

6344 CONISTON TERRACE  
NORTH PORT, FL 34287

**FEI Number:** 30-0325840

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CODY, ANDREW PAUL  
210 BOUNDARY BLVD.  
ROTUNDA WEST, FL US

**Name and Address of New Registered Agent:**

CODY, ANDREW P MR.  
6344 CONISTON TERRACE  
NORTH PORT, FL 34287 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: ANDREW PAUL CODY

03/12/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: CODY, ANDREW P  
Address: 665 S. BROADWAY  
City-St-Zip: ENGLEWOOD, FL 34223

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: CODY, ANDREW P  
Address: 6344 CONISTON TERRACE  
City-St-Zip: NORTH PORT, FL 34287

I hereby certify that the information supplied with this filing does not qualify for the 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: ANDREW PAUL CODY

MNGR

03/12/2007

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