

# **2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000083645

**FILED**  
**Mar 18, 2009**  
**Secretary of State**

**Entity Name:** ALL-IN-ONE PROPERTY MAINTENANCE LLC

**Current Principal Place of Business:**

174 WATERCOLOR WAY  
#151  
SANTA ROSA BEACH, FL 32549 US

**New Principal Place of Business:**

**Current Mailing Address:**

174 WATERCOLOR WAY  
#151  
SANTA ROSA BEACH, FL 32549 US

**New Mailing Address:**

**FEI Number:** 68-0613676      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

WILSON, ROBERT C  
174 WATERCOLOR WAY  
#151  
SANTA ROSA BEACH, FL 32549 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:** WILSON, ROBERT C  
**Address:** 174 WATERCOLOR WAY #151  
**City-St-Zip:** SANTA ROSA BEACH, FL 32549 US

**ADDITIONS/CHANGES:**

**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:** ROBERT C WILSON

MGRM

03/18/2009

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