

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000088788

**FILED**  
**Apr 26, 2006**  
**Secretary of State**

**Entity Name:** MICHAEL DREW PAINTING LLC

**Current Principal Place of Business:**

234 STRAWFLOWER CT.  
DELTONA, FL 32725 US

**New Principal Place of Business:**

122 DRES DAN CT.  
SANFORD, FL 32771 US

**Current Mailing Address:**

234 STRAWFLOWER CT.  
DELTONA, FL 32725 US

**New Mailing Address:**

122 DRES DAN CT.  
SANFORD, FL 32771 US

**FEI Number:** 32-0158390

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

DREW, MICHAEL J  
234 STRAWFLOWER CT.  
DELTONA, FL 32725 US

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

DREW, MICHAEL J  
122 DRES DAN CT.  
SANFORD, FL 32771 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:**

04/26/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR ( ) Delete  
**Name:** DREW, MICHAEL J  
**Address:** 234 STRAWFLOWER CT.  
**City-St-Zip:** DELTONA, FL 32725 US

**ADDITIONS/CHANGES:**

**Title:** MGR (X) Change ( ) Addition  
**Name:** DREW, MICHAEL J  
**Address:** 122 DRES DAN CT.  
**City-St-Zip:** SANFORD, FL 32771 US

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:** MICHAEL J DREW

MGR

04/26/2006

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