

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000097972

FILED  
May 01, 2009  
Secretary of State

Entity Name: MJM PAINTING LLC

**Current Principal Place of Business:**

8100 SE CAMELLIA DRIVE  
HOBE SOUND, FL 33455

**New Principal Place of Business:**

**Current Mailing Address:**

8100 SE CAMELLIA DRIVE  
HOBE SOUND, FL 33455

**New Mailing Address:**

FEI Number: 02-0759148      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

MCARDLE, MICHAEL J  
8100 SE CAMELLIA DRIVE  
HOBE SOUND, FL 33455      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: MCARDLE, MICHEAL J MGR  
Address: 8100 S.E. CAMEILLA DR  
City-St-Zip: HOBE SOUND, FL 33455 US

Title: MGRM ( ) Delete  
Name: MCARDLE, KYLA F MGRM  
Address: 8100 S.E. CAMELLIA DR.  
City-St-Zip: HOBE SOUND, FL 33455 US

Title: MGRM ( ) Delete  
Name: PITMEN, NEIL MGRM  
Address: 4410 N.E. INDIAN RIVER DR.  
City-St-Zip: JENSEN BCH., FL 34957 US

Title: MGRM ( ) Delete  
Name: MCARDLE, MATT J  
Address: 8089 S.E.CAMELLIA DR.  
City-St-Zip: HOBE SOUND, FL 33455

**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: MICHAEL J. MCARDLE

MGR

05/01/2009

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