

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000098105

**FILED**  
**Mar 02, 2009**  
**Secretary of State**

**Entity Name:** NORTH FLORIDA DOOR CONTROL, LLC

**Current Principal Place of Business:**

4318 SW 50TH STREET  
GAINESVILLE, FL 32608

**New Principal Place of Business:**

**Current Mailing Address:**

4318 SW 50TH STREET  
GAINESVILLE, FL 32608

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

BERRY, PERRY  
4318 SW 50TH STREET  
GAINESVILLE, FL 32608 US

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

BERRY, PERRY M OWNER  
4318 SW 50TH STREET  
GAINESVILLE, FL 32608 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: PERRY M. BERRY

03/02/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: BERRY, PERRY  
Address: 4318 SW 50TH STREET  
City-St-Zip: GAINESVILLE, FL 32608

**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: PERRY M. BERRY

OWN

03/02/2009

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