



2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 22, 2007 08:00 A
Secretary of State

DOCUMENT # L05000101446 1. Entity Name RESIDENTIAL CHOICE PAINTING & PRESSURE WASHING, LLC	
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Principal Place of Business 8511 HEATHER BLVD. WEEKI WACHEE, FL 34613	Mailing Address 8511 HEATHER BLVD. WEEKI WACHEE, FL 34613
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DO NOT WRITE IN THIS SPACE

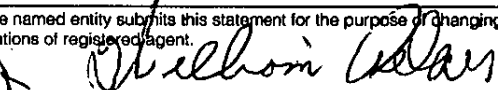


04062007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 30-0335887	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent ADAIR, WILLIAM 8511 HEATHER BLVD. WEEKI WACHEE, FL 34613	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE:  DATE: _____

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)

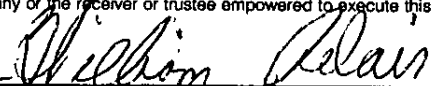
**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ADAIR, WILLIAM 8511 HEATHER BLVD. WEEKI WACHEE, FL 34613
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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05/31/07-80005-014 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:  DATE: _____ DAYTIME PHONE #: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE