

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000106073

FILED
Apr 15, 2009
Secretary of State

Entity Name: KEVAN MEROLD'S BIG DAWG RENOVATIONS, LLC

Current Principal Place of Business:

8101 DELTA DRIVE
MILTON, FL 32583

New Principal Place of Business:

Current Mailing Address:

8101 DELTA DRIVE
MILTON, FL 32583

New Mailing Address:

FEI Number: 34-2057574

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MEROLD, KEVAN A
8101 DELTA DRIVE
MILTON, FL 32583 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: MGR () Delete
Name: MEROLD, KEVAN A
Address: 8101 DELTA DRIVE
City-St-Zip: MILTON, FL 32583

Title: MGRM () Delete
Name: CAMPUS, FRANCES M
Address: 256 BOB WHITE DRIVE
City-St-Zip: PENSACOLA, FL 32514

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MEROLD, KEVAN A
Address: 8101 DELTA DRIVE
City-St-Zip: MILTON, FL 32583 US

Title: MGRM (X) Change () Addition
Name: CAMPUS, FRANCES M
Address: 256 BOB WHITE DRIVE
City-St-Zip: PENSACOLA, FL 32514 US

Title: MGRM () Change (X) Addition
Name: KNAPP, JAMES
Address: 846 ESCONDITAS PLACE
City-St-Zip: PENSACOLA, FL 32506 US

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: KEVAN A. MEROLD

MGR

04/15/2009

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