

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000110363

**FILED**  
**Apr 29, 2012**  
**Secretary of State**

**Entity Name:** DIMENSIONS REMODELING & HOME IMPROVEMENTS LLC

**Current Principal Place of Business:**

1210 WINDY WILLOWS DR  
JACKSONVILLE, FL 32225

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 350561  
JACKSONVILLE, FL 32235

**New Mailing Address:**

**FEI Number:** 55-0908268

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GREEN, SHAWN A  
1210 WINDY WILLOWS DR  
JACKSONVILLE, FL 32225 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: MGRM  
Name: GREEN, SHAWN A  
Address: 1210 WINDY WILLOWS DR  
City-St-Zip: JACKSONVILLE, FL 32225

I hereby 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: SHAWN A. GREEN

MGRM

04/29/2012

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