

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 15, 2008 8:00 am
Secretary of State

02-15-2008 90057 001 ****50.00
02-15-2008 90057 002 ****93.75

DOCUMENT # L05000115854 1. Entity Name HORACE BRAZZLE DRYWALDING & PLASTERING, LLC	
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Principal Place of Business 23645 NW 178TH PLACE HIGH SPRINGS, FL 32655	Mailing Address 23645 NW 178TH PLACE HIGH SPRINGS, FL 32655
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DO NOT WRITE IN THIS SPACE



02062008No Chg-LLC CR2E083 (12/07)

4. FEI Number 56-2546763	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent BRAZZLE, HORACE 23645 NW 178TH PLACE HIGH SPRINGS, FL 32655	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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BRAZZLE, HORACE N 23645 NW 178TH PLACE HIGH SPRINGS, FL 32655
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**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: Horace Brazzle 2/6/08 (352) 231-9726
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #