

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000034119

FILED  
Jan 08, 2007  
Secretary of State

**Entity Name:** PRESSURE WASHING BY SHOW CASE, LLC

**Current Principal Place of Business:**

4342 SPRING PARK ROAD  
JACKSONVILLE, FL 32207 US

**New Principal Place of Business:**

4342 SPRING PARK ROAD  
FRONT OFFICE  
JACKSONVILLE, FL 32207 US

**Current Mailing Address:**

4342 SPRING PARK ROAD  
JACKSONVILLE, FL 32207 US

**New Mailing Address:**

PO BOX 600333  
JACKSONVILLE, FL 32260 US

FEI Number: 20-4825796

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

DINGIANNI, VINCENTE III  
412 TORTOISE TRACE  
JACKSONVILLE, FL 32259 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 ( ) Delete  
Name: DINGIANNI, JAMIE L  
Address: 4342 SPRING PARK ROAD  
City-St-Zip: JACKSONVILLE, FL 32207 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: DINGIANNI, JAMIE L  
Address: PO BOX 600333  
City-St-Zip: JACKSONVILLE, FL 32260 US

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMIE L DINGIANNI

MGRM

01/08/2007

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