

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000034119

**FILED**  
**Feb 06, 2010**  
**Secretary of State**

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

**Current Principal Place of Business:**

4342 SPRING PARK ROAD  
FRONT OFFICE  
JACKSONVILLE, FL 32207 US

**New Principal Place of Business:**

412 TORTOISE TRACE  
SAINT JOHNS, FL 32259 US

**Current Mailing Address:**

PO BOX 600333  
JACKSONVILLE, FL 32260 US

**New Mailing Address:**

PO BOX 600333  
SAINT JOHNS, 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:**

DINGIANNI, VINCENTE III  
412 TORTOISE TRACE  
SAINT JOHNS, FL 32259 US

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: VINCENTE DINGIANNI III

02/06/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: DINGIANNI, JAMIE L  
Address: PO BOX 600333  
City-St-Zip: SAINT JOHNS, FL 32260 US

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: JAMIE DINGIANNI

MGR

02/06/2010

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