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2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

2007 JUL -9 AM 9:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

60000159

DOCUMENT # L06000037768

1. Entity Name
KOLBY'S PAINTING, LLC

Principal Place of Business	Mailing Address
159 DEER RUN S DEFUNIAK SPRINGS, FL 32435 US	P O BOX 382 DEFUNIAK SPRINGS, FL 32435 US

2. Principal Place of Business - No. P.O. Box #	3. Mailing Address
285 S.W. Precision Loop	285 S.W. Precision Loop
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Lake City FL	City & State: Lake City FL
Zip: 32024 Country: U.S.	Zip: 32024 Country: U.S.

01022007 Chg-LLC CR2E083 (12/06)

4. FEI Number: 20-4707048 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
NIEWISCH, ADAM W 159 DEER RUN S DEFUNIAK SPRINGS, FL 32435	Name: Street Address (P.O. Box Number is Not Acceptable): 285 S.W. Precision Loop City: Lake City FL Zip: 32024

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: Adam W. Niewisch 1-2-07
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee Is $50.00
Due by May 1, 2007

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE	MGR ☐ Delete	TITLE	MGRM ☐ Change ☒ Addition
NAME	NIEWISCH, ADAM W	NAME	Randy J. Pollard
STREET ADDRESS	P O BOX 382	STREET ADDRESS	171 SW Merrimack Pl
CITY-ST-ZIP	DEFUNIAK SPRINGS, FL 32435	CITY-ST-ZIP	Lake City, FL 32024
TITLE	MGRM ☒ Delete	TITLE	☐ Change ☐ Addition
NAME	WAGNER, WILLIAM L	NAME	
STREET ADDRESS	1900 PRESIDIO ST APT C	STREET ADDRESS	
CITY-ST-ZIP	NAVARRE, FL 32566	CITY-ST-ZIP	
TITLE	MGRM ☒ Delete	TITLE	☐ Change ☐ Addition
NAME	CARROLL, ERIC A	NAME	
STREET ADDRESS	508 HURLEY DR.	STREET ADDRESS	
CITY-ST-ZIP	DEFUNIAK SPRINGS, FL 32433	CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

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: Adam W. Niewisch 1-2-07 850-401-4551
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

per pat Bailey 7/11/07

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7/10/07 DEPOSITS/PAYMENTS DETAIL SCREEN 3:41 PM

DEPOSIT NUMBER : 07/09/07 01064 004
ACCOUNT NUMBER :
USER ID : KWALKER
DEBIT MEMO DATE:
TRACKING NUMBER: 600105778766
REQUESTOR : DM#74165-E REPLC FEE
SUB ACCT NUMBER:

DEPOSIT TYPE : COR
DEPOSIT AMOUNT : 65.00
DEPOSIT BALANCE: 0.00
VOID DATE :
DOCUMENT NUMBER: L06000037768
LEDGER DATE : 07/09/07

CATEGORY	DESCRIPTION	AMOUNT
AR	ANNUAL REPORT	50.00
RTNCK	RETURNED CHECK FEE	15.00

+ NEXT, - PREV, 1. MENU, 2. FILING, 3. MGR/MEM, 4. EVENTS, 5. NOTES

ENTER SELECTION AND CR: