

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000041629

Entity Name: PATRIOT INTERIORS LLC

FILED
May 08, 2009
Secretary of State

Current Principal Place of Business:

1456 MARISOL COURT
PORT SAINT LUCIE, FL 34952

New Principal Place of Business:

Current Mailing Address:

1456 MARISOL COURT
PORT SAINT LUCIE, FL 34952

New Mailing Address:

FEI Number: 20-4750921 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: MGR () Delete
Name: SACKETT, ROBERT E
Address: 1456 MARISOL COURT
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: PRES () Delete
Name: HALE, RICKY MR
Address: 713 S M ST
City-St-Zip: LAKE WORTH, FL 33460 US

Title: TRES () Delete
Name: MANDY, DARIN MR
Address: 6058 HIGHRIIDGE RD
City-St-Zip: LANTANA, FL 33462 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: ROBERT SACKETT

MGR

05/08/2009

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