

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000053629

FILED
May 03, 2007
Secretary of State

Entity Name: CERTIFIED INSPECTION AND REPAIR, LLC

Current Principal Place of Business:

782 SW PINETREE LANE
PALM CITY, FL 34990

New Principal Place of Business:

Current Mailing Address:

PO BOX 298
PALM CITY, FL 34991

New Mailing Address:

FEI Number: 20-4925546 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:

BYNUM, WALTER
782 SW PINETREE LANE
PALM CITY, FL 34990 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: BYNUM, WALTER
Address: PO BOX 298
City-St-Zip: PALM CITY, FL 34991

Title: MGRM () Delete
Name: DAGGY, CHRIS
Address: 1449 KENMORE ST
City-St-Zip: PORT CHARLOTTE, FL 33952

ADDITIONS/CHANGES:

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: WALTER BYNUM

MGRM

05/03/2007

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