

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000056886

Entity Name: FLORIDA EXTERIORS LLC

FILED
Feb 05, 2009
Secretary of State

Current Principal Place of Business:

202 W DUVAL STREET
LAKE CITY, FL 32055

New Principal Place of Business:

Current Mailing Address:

PO BOX 1479
LAKE CITY, FL 32025

New Mailing Address:

202 W DUVAL STREET
LAKE CITY, FL 32055

FEI Number: 20-5377907

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPARKS, JOSHUA D
202 W DUVAL STREET
LAKE CITY FL, FL 32055 US

Name and Address of New Registered Agent:

SPARKS, JOSHUA D
202 W DUVAL STREET
LAKE CITY, FL 32055 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:

02/05/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGMR () Delete
Name: SPARKS, JOSHUA D
Address: 202 W DUVAL STREET
City-St-Zip: LAKE CITY, FL 32055

Title: MGMR () Delete
Name: RAINBOLT, DANIEL
Address: 202 W DUVAL STREET
City-St-Zip: LAKE CITY, FL 32055

Title: MGMR () Delete
Name: SPARKS, BENJAMIN L
Address: 202 W DUVAL STREET
City-St-Zip: LAKE CITY, FL 32055

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: JOSHUA SPARKS

MGMR

02/05/2009

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