## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # L06000061217

1. Entity Name

**D&G INTERIOR SOLUTIONS LLC** 

FILED Mar 26, 2008 08:00 A Secretary of State

Principal Place of Business

238 WEBB LANE

PO BOX 335

STEINHATCHEE, FL 32350

Mailing Address

238 WEBB LANE

PO BOX 335

STEINHATCHEE, FL 32350



02102008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number Applied For Not Applied For Not Applicable

5. Certificate of Status Desired Status Desired Fee Required Fee Required

6. Name and Address of Current Registered Agent

MCKENNY, GEORGE 238 WEBB LANE PO BOX 335 STEINHATCHEE, FL 32350

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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.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required wh	nen reinstating) (	DATE .
FILE NOWIII FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75				
9.	MANAGING MEMBERS/MANAGERS		· · · · ·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MCKINNEY, GEORGE 238 WEBB LANE STEINHATCHEE, FL 32350		UQ) 04/03.	0000870747 /08-80103-820 143.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM OVERSTREET, DALE PO BOX 577 STEINHATCHEE, FL 32350			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	•		DO NOT V	WRITE
TITLE NAME STREET ADDRESS CITY-S1-ZIP >			IN THIS S	SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS 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 frue and accurate and that my signature shall have the same legal effect as if made under cath; 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.				

OR AUTHORIZED REPRESENTATIVE