

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L06000070118

FILED
Dec 14, 2009
Secretary of State**Entity Name:** BIG D REMODELING, LLC**Current Principal Place of Business:**1813 MAUVA JUAN AVE
JACKSONVILLE, FL 32225**New Principal Place of Business:****Current Mailing Address:**1813 MAUVA JUAN AVE
JACKSONVILLE, FL 32225**New Mailing Address:****FEI Number:** 20-5202187**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DICK, DAVID B
1813 MAUVA JUAN AVE
JACKSONVILLE, FL 32225 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: DICK, DAVID B
Address: 1813 MAUVA JUAN AVE
City-St-Zip: JACKSONVILLE, FL 32225Title: MGR () Delete
Name: FISHEL, DANIEL S
Address: 1416 ALETHA DRIVE
City-St-Zip: JACKSONVILLE, FL 32211Title: () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: MGR () Change (X) Addition
Name: HOLLOWAY, TODD
Address: 13826 WEEPING WILLOW WAY
City-St-Zip: JACKSONVILLE, FL 32224

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: DAVID DICK

MGRM

12/14/2009

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