2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 02, 2008
Secretary of State

DOCUMENT# L06000076189

Entity Name: PREMIER FLORIDA ROOFING LLC

Current Principal Place of Business:

5149 HANOVER LN
LAKELAND, FL 33813

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 7152
LAKELAND, FL 33807

New Mailing Address:

FEI Number: 20-5270936 **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:

HIGHTOWER, KEITH
6220 HIGHLAND RISE DR
LAKELAND, FL 33813 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: DUGGAN, PATRICK J
Address: P.O. BOX 7152
City-St-Zip: LAKELAND, FL 33807

Title: MGRM ( ) Delete
Name: HIGHTOWER, KEITH
Address: 6220 HIGHLAND RISE DR.
City-St-Zip: LAKELAND, FL 33813

Title: ( ) 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: MGRM ( ) Change (X) Addition
Name: HIGHTOWER, MARY N
Address: 4454 WALLACE RD
City-St-Zip: LAKELAND, FL 33802

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: KEITH HIGHTOWER MGRM 07/02/2008

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