

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000083763

Entity Name: SWIFT PAINTING LLC

FILED  
Mar 31, 2008  
Secretary of State

## Current Principal Place of Business:

616 ANDREW STREET  
ALTAMONTE SPRINGS, FL 32714 US

## New Principal Place of Business:

## Current Mailing Address:

616 ANDREW STREET  
ALTAMONTE SPRINGS, FL 32714 US

## New Mailing Address:

67 ORHCARD WAY N.  
POTOMAC, MD 20584 US

FEI Number: 87-0779826

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SWIFT, MICKEY J  
616 ANDREW STREET  
ALTAMONTE SPRINGS, FL 32714 US

## Name and Address of New Registered Agent:

MICKEY, SWIFT  
616 ANDREW ST.  
ALTAMONTE SPRINGS, FL 32714 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: MICKEY SWIFT

03/31/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: SWIFT, MICKEY J  
Address: 616 ANDREW STREET  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

Title: MGRM ( ) Delete  
Name: COWAN, ROGER R JR.  
Address: 616 ANDREW STREET  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM (X) Change ( ) Addition  
Name: COWAN, ROGER R JR.  
Address: 67 ORCHARD WAY N.  
City-St-Zip: POTOMAC, MD 20854 US

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: ROGER COWAN

MGRM

03/31/2008

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