


**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 10, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L06000085190</b> 1. Entity Name <b>ORANGE &amp; BLUE JANITORIAL SERVICES LLC</b>	
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Principal Place of Business <b>2511 N.E. 11TH STREET GAINESVILLE, FL 32609</b>	Mailing Address <b>2511 N.E. 11TH STREET GAINESVILLE, FL 32609</b>
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**DO NOT WRITE IN THIS SPACE**



04082008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number <b>74-3175859</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**WOODY, DONALEE  
2511 N.E. 11TH STREET  
GAINESVILLE, FL 32609**

**DO NOT WRITE  
IN THIS SPACE**

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 *Donalee Woody* *Donalee Woody* *4/8/08*  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when resigning) DATE

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

**U000000890504**  
**04/22/08-80097-016 138.75**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR WOODY, WILLIE L 2511 N.E. 11TH STREET GAINESVILLE, FL 32609</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM WOODY, DAVIN D 3643 N.W. 48TH PL GAINESVILLE, FL 32605</b>
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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 true and accurate and that my 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:** *Willie L. Woody* *Willie L. Woody* *352-373-2576*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #