

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000104889

FILED
Jan 17, 2008
Secretary of State

Entity Name: PATRIOT PRESSURE CLEANING & SEALING LLC

Current Principal Place of Business:

8640 TARPON SPRINGS RD
ODESSA, FL 33556 US

New Principal Place of Business:

Current Mailing Address:

340 NE 4TH STREET
GAINESVILLE, FL 32601 US

New Mailing Address:

8640 TARPON SPRINGS RD
ODESSA, FL 33556 US

FEI Number: 20-5796611

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEAVER, MATTHEW E
340 NE 4TH STREET
GAINESVILLE, FL 32601 US

Name and Address of New Registered Agent:

WEAVER, MATTHEW E
8640 TARPON SPRINGS RD
ODESSA, FL 33556 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: MATTHEW E WEAVER

01/17/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WEAVER, MATTHEW E
Address: 340 NE 4TH STREET
City-St-Zip: GAINESVILLE, FL 32601 US

Title: MGR () Delete
Name: STERLING, JAMES T
Address: 8640 TARPON SPRINGS RD
City-St-Zip: ODESSA, FL 33556 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WEAVER, MATTHEW E
Address: 8640 TARPON SPRINGS RD
City-St-Zip: ODESSA, FL 33556 US

Title: MGRM (X) Change () Addition
Name: STERLING, JAMES T
Address: 8640 TARPON SPRINGS RD
City-St-Zip: ODESSA, FL 33556 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: MATTHEW E WEAVER

MGRM

01/17/2008

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