


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 22, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000110759

1. Entity Name
 DYER RESTORATIONS, LLC



Principal Place of Business 2310 MIRANDA AVENUE TALLAHASSEE, FL 32304	Mailing Address 2310 MIRANDA AVENUE TALLAHASSEE, FL 32304
---	---

DO NOT WRITE IN THIS SPACE



04152008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 61-1515253	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MEIS, JOHN
 2310 MIRANDA AVENUE
 TALLAHASSEE, FL 32304

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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

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

00000964853
 05/09/08-80053-010 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MEIS, JOHN 2310 MIRANDA AVENUE TALLAHASSEE, FL 32304
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR REMHOFF, VALERIE 77 DEERFIELD ROAD WAYNE, NJ 07470
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MEIS, IRENE 6 POND HOLLOW ROAD SUSSEX, NJ 07461
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MEIS, JEANNINE 2310 MIRANDA AVENUE TALLAHASSEE, FL 32304
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: John Meis Date: 4/21/08 Daytime Phone #: (850) 513-1371

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE