

# **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000117054

**FILED**  
**Mar 16, 2007**  
**Secretary of State**

**Entity Name:** FENCE ART OF FLORIDA LLC

**Current Principal Place of Business:**

480 S. GULF BLVD.  
PLACIDA, FL 33946 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 983  
PLACIDA, FL 33946

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For (X)**                      **FEI Number Not Applicable ( )**                      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MILROY, DONALD W  
7075 PLACIDA RD.  
ENGLEWOOD, FL 34224 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: MGRM ( ) Delete  
Name: PEACOCK, KIM L  
Address: 480 S. GOAT BLVD.  
City-St-Zip: PLACIDA, FL 33946 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: PEACOCK, KIM L  
Address: 480 S. GULF BLVD.  
City-St-Zip: PLACIDA, FL 33946 US

I hereby certify that the information supplied with this filing does not qualify for the 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: KIM L PEACOCK

MS

03/16/2007

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