2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000021448

City-St-Zip:

JACKSONVILLE, FL 32258

Entity Name: TRUE-LINE CUSTOM FENCE LLC

FILED Apr 17, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 11497 SHADY MEADOW DRIVE JACKSONVILLE, FL 32258 **Current Mailing Address: New Mailing Address:** 11497 SHADY MEADOW DRIVE JACKSONVILLE, FL 32258 FEI Number: 22-3954834 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete DUBOIS, TIMOTHY Name: Name: Address: 11497 SHADY MEADOW DRIVE Address: City-St-Zip: JACKSONVILLE, FL 32258 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: TRUE, JAMES W Name: Address: 11497 SHADY MEADOW DRIVE Address: City-St-Zip: JACKSONVILLE, FL 32258 City-St-Zip: Title: () Delete Title: () Change () Addition TRUE, JAMES W Name: Name: 11497 SHADY MEADOW DRIVE Address: Address:

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.

City-St-Zip:

SIGNATURE: JAMES W. TRUE MGR 04/17/2008