2008 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR) - DUE BY MAY 1, 2008

2/1

FILED
Mar 10, 2008 8:00 am
Secretary of State
02-12-2008 90064 035 ***138.75

DOCUMENT # L07000025898

1. Entity Name
CALDWELL CLEANING LLC

Principal Place of Business	Mailing Address
935 SUNRIDGE WAY SARASOTA FL 34234	935 SUNRIDGE WAY SARASOTA FL 34234

1st MOORE CR2E083 (10/07)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
4415 65th TERRACE E	4415 65th Terrace East
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: SARASOTA, FL	City & State: Sarasota, Fl
Zip: 34243 Country: SARASOTA	Zip: 34243 Country: Sarasota

4. FEI Number: 20 8594202 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CALDWELL, MARTHA
935 SUNRIDGE WAY
SARASOTA FL 34234

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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: Richard Caldwell DATE: 2/2/08
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
Make Check Payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR CALDWELL, RICHARD 935 SUNRIDGE WAY SARASOTA FL 34234 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CALDWELL, RICHARD 4415 65th TERRACE EAST SARASOTA, FL 34243 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR CALDWELL, MARTHA 935 SUNRIDGE WAY SARASOTA FL 34234 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CALDWELL, MARTHA 4415 65th TERRACE EAST SARASOTA, FL 34243 ☑ Change ☐ Addition
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

RICHARD CALDWELL

SIGNATURE: Richard Caldwell 2/2/08 941-323-2932
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #