

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000044998

FILED
May 01, 2008
Secretary of State

Entity Name: RIGHTEOUS PAINTING COMPANY LLC

Current Principal Place of Business:

2046 VENUS STREET
JACKSONVILLE, FL 32209

New Principal Place of Business:

Current Mailing Address:

2046 VENUS STREET
JACKSONVILLE, FL 32209

New Mailing Address:

FEI Number: 26-0218873 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MCKIBBEN, DEREK
2046 VENUS STREET
JACKSONVILLE, FL 32209 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:

Title: MGR () Delete
Name: MCKIBBEN, DEREK MARTEZ
Address: 2046 VENUS STREET
City-St-Zip: JACKSONVILLE, FL 32209

Title: MGRM () Delete
Name: BRONSON, MARY
Address: 2046 VENUS STREET
City-St-Zip: JACKSONVILLE, FL 32209

Title: MGRM () Delete
Name: CONNER, GEORGE
Address: 2040 VENUS STREET
City-St-Zip: JACKSONVILLE, FL 32209

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DEREK MCKIBBEN

MGR

05/01/2008

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