

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000061733

FILED
Jan 08, 2008
Secretary of State

Entity Name: BOWIGGLEY PAINTING, LLC

Current Principal Place of Business:

16 KRISTIN CIRCLE
NICEVILLE, FL 32578

New Principal Place of Business:

Current Mailing Address:

16 KRISTIN CIRCLE
NICEVILLE, FL 32578

New Mailing Address:

FEI Number: 11-3816501

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRANTLEY, ZACH
16 KRISTIN CIRCLE
NICEVILLE, FL 32578 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: MGR () Delete
Name: BRANTLEY, ZACH
Address: 16 KRISTIN CIRCLE
City-St-Zip: NICEVILLE, FL 32578

Title: MGRM () Delete
Name: WIGGINS, CHARLES
Address: 760 COUNM RD 1883
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: MGRM () Delete
Name: PETERS, GERALD
Address: 1333 SANDY CREEK ROAD
City-St-Zip: PONCE DE LEON, FL 32444

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: WIGGINS, CHARLES
Address: 116 RUBENS LANE
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: MGRM (X) Change () Addition
Name: WIGGINS JR., CHARLES
Address: 116 RUBENS LANE
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

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: CHARLES WIGGINS

MGR

01/08/2008

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