

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 02, 2008 8:00 am
Secretary of State

05-02-2008 90021 006 ***138.75

DOCUMENT # L07000063120					
1. Entity Name KEVERN PAINT AND BODY LLC					
Principal Place of Business 6731 STUART AVENUE SUITE 13 JACKSONVILLE, FL 32254			Mailing Address 6731 STUART AVENUE SUITE 13 JACKSONVILLE, FL 32254		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
6. Name and Address of Current Registered Agent KEVERN, RICHARD L JR 2386 GABRIEL DRIVE ORANGE PARK, FL 32073				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 <u>Richard L Kevern Jr</u> Signature, typed or printed name of authorized agent and title if applicable				DATE <u>5/1/08</u> DATE	
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	<u>President</u> <u>Richard L Kevern Jr</u> <u>6731 Stuart Ave. 13A</u> <u>Jacksonville FL 32254</u>			☐ Delete	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	☐ Change ☐ Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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.					
SIGNATURE: <u>Richard L Kevern Jr</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE				DATE <u>5/1/08</u> (904) 536-8822	