

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000086021

FILED  
Sep 02, 2008  
Secretary of State

**Entity Name:** NOBLE PAINTING AND REPAIRS LLC

**Current Principal Place of Business:**

4 ESSEX DRIVE  
ORMOND BEACH, FL 32176

**New Principal Place of Business:**

**Current Mailing Address:**

4 ESSEX DRIVE  
ORMOND BEACH, FL 32176

**New Mailing Address:**

FEI Number: 45-0571023      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
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:**

AGENTS AND CORPORATIONS, INC.  
300 FIFTH AVENUE SOUTH  
SUITE 101-330  
NAPLES, FL 34102 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: NOBLE, ERIL  
Address: 4 ESSEX DRIVE  
City-St-Zip: ORMOND BEACH, FL 32176

Title: MGR ( ) Delete  
Name: CORBITT, LORI  
Address: 4 ESSEX DRIVE  
City-St-Zip: ORMOND BEACH, FL 32176

**ADDITIONS/CHANGES:**

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

Title: MGR (X) Change ( ) Addition  
Name: CORBITT, LORI  
Address: 4 ESSEX DRIVE  
City-St-Zip: ORMOND BEACH, FL 32176

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: ERIL NOBLE

MGR

09/02/2008

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