

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jun 04, 2008 8:00 am**  
**Secretary of State**

06-04-2008 90255 025 \*\*\*138.75

50006787



03092008 Chg-LLC CR2E083 (12/06)

<b>DOCUMENT # L07000106807</b> 1. Entity Name <b>MY OWN PAINTER OF HIGHLANDS, LLC</b>					
Principal Place of Business <b>9426 S. ORANGE BLOSSOM BLVD. SEBRING, FL 33875</b>			Mailing Address <b>9426 S. ORANGE BLOSSOM BLVD. SEBRING, FL 33875</b>		
2. Principal Place of Business - No P.O. Box # <b>3522 Hoyt Ave</b> Suite, Apt. #, etc.		3. Mailing Address <b>3522 Hoyt Ave</b> Suite, Apt. #, etc.			
City & State <b>Sebring</b>		City & State <b>Sebring FL</b>		4. FEI Number <div style="border: 1px solid black; width: 100px; height: 20px;"></div>	
Zip <b>33876</b>		Country <b>Highlands</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>SMITHERS, KEITH 9426 S. ORANGE BLOSSOM BLVD. SEBRING, FL 33875</b>		7. Name and Address of New Registered Agent <div style="border: 1px solid black; padding: 2px;">Name</div> <div style="border: 1px solid black; padding: 2px;">Street Address (P.O. Box Number is Not Acceptable)</div> <div style="border: 1px solid black; padding: 2px;">City</div> <div style="display: flex; justify-content: space-between; border: 1px solid black; padding: 2px;"> <span><b>FL</b></span> <span>Zip Code</span> </div>			
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>					
<b>FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75</b>			<b>Make check payable to Florida Department of State</b>		
<b>9. MANAGING MEMBERS/MANAGERS</b>			<b>10. ADDITIONS/CHANGES</b>		
TITLE	Mr. Keith Smithers <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	9426 S. Orange Blossom Blvd.	NAME			
STREET ADDRESS	Sebring, Florida 33875	STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
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.					
<b>SIGNATURE:</b> <u>James K. Smithers MBMR - James K. Smithers</u> <span style="float: right;"><b>4-28-08</b></span> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>					