

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000118891

Entity Name: PAINT IT CLEAN IT LLC

FILED  
May 01, 2008  
Secretary of State

**Current Principal Place of Business:**

1408 CAPTIAL CIRCLE  
SUITE H  
TALLAHASSEE, FL 32308

**New Principal Place of Business:**

5324 GOVE VALLEY RD  
TALLAHASSEE, FL 32303

**Current Mailing Address:**

1408 CAPTIAL CIRCLE  
SUITE H  
TALLAHASSEE, FL 32308

**New Mailing Address:**

5324 GOVE VALLEY RD  
TALLAHASSEE, FL 32303

FEI Number:                      FEI Number Applied For (X)                      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:**

RUDD, W J  
2121- A KILLARNEY WAY  
TALLAHASSEE, FL 32309    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:**

**ADDITIONS/CHANGES:**

Title:                      MGRM                      ( ) Delete  
Name:                      RUDD, WENDELL  
Address:                      2121-A KILLARNEY WAY  
City-St-Zip:                      TALLAHASSEE, FL 32309

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

Title:                      MGRM                      ( ) Delete  
Name:                      RUDD, CINDY  
Address:                      2121-A KILLARNEY WAY  
City-St-Zip:                      TALLAHASSEE, FL 32309

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

Title:                      MGRM                      ( ) Delete  
Name:                      RUDD, RAYMOND C  
Address:                      2121- A KILLARNEY WAY  
City-St-Zip:                      TALLAHASSEE, FL 32309

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: WENDELL RUDD

MGRM

05/01/2008

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