

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000080362

FILED  
Apr 19, 2011  
Secretary of State

**Entity Name:** SHAPPELL MOBIL DETAILING & PRESSURE CLEANING L.L.C.

**Current Principal Place of Business:**

1068 SUMMIT TRAIL CIRCLE  
B  
WEST PALM BEACH, FL 33415 US

**New Principal Place of Business:**

3203 ANNE JOLLEY COURT  
LAND O' LAKES, FL 34639 US

**Current Mailing Address:**

1068 SUMMIT TRAIL CIRCLE  
B  
WEST PALM BEACH, FL 33415 US

**New Mailing Address:**

3203 ANNE JOLLEY COURT  
LAND O' LAKES, FL 34639 US

**FEI Number:** 26-3252705

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SHAPPELL MOBIL DETAILING AND PRESSURE CLE.  
1068 SUMMIT TRAIL CIRCLE  
B  
WEST PALM BEACH, FL 33415 US

**Name and Address of New Registered Agent:**

SHAPPELL MOBIL DETAILING AND PRESSURE CLE.  
3203 ANNE JOLLEY COURT  
LAND O' LAKES, FL 334134639 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: CHRISTOPHER SHAPPELL

04/19/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SHAPPELL, CHRISTOPHER  
Address: 3203 ANNE JOLLEY COURT  
City-St-Zip: LAND O' LAKES, FL 334134639 US

Title: MGRM  
Name: SHAPPELL, TRACEY  
Address: 3203 ANNE JOLLEY COURT  
City-St-Zip: LAND O' LAKES, FL 34639 US

Title: MGRM  
Name: SHAPPELL, JASON  
Address: 3203 ANNE JOLLEY COURT  
City-St-Zip: LAND O' LAKES, FL 34639 US

I hereby 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: CHRISTOPHER SHAPPELL

MGR.

04/19/2011

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