2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 15, 2009
Secretary of State

DOCUMENT# L08000109919

Entity Name: FORT MYERS PRESSURE WASHING, LLC

Current Principal Place of Business:

8080 ANHINDA RD.
FORT MYERS, FL 33967 US

New Principal Place of Business:

339 FLAMINGO CIRCLE
FORT MYERS, FL 33967 US

Current Mailing Address:

301 FAYETTEVILLE ST
2706
RALEIGH, NC 27601 US

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:

AMERICAN SAFETY COUNCIL, INC.
5125 ADANSON ST.
SUITE 500
ORLANDO, FL 32804 US

Name and Address of New Registered Agent:

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: MGRM ( ) Delete
Name: WILLIAMS, DANNY
Address: 301 FAYETTEVILLE ST 2706
City-St-Zip: RALEIGH, NC 27601 US

Title: MGRM ( ) Delete
Name: WILLIAMS, GARY
Address: 8080 ANHINDA RD.
City-St-Zip: FORT MYERS, FL 33967 US

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change ( ) Addition
Name: WILLIAMS, GARY
Address: 339 FLAMINGO CIRCLE
City-St-Zip: FORT MYERS, FL 33967 US

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: DANNY WILLIAMS MGRM 07/15/2009

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