

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000025439

**FILED**  
**Feb 16, 2012**  
**Secretary of State**

**Entity Name:** PREMIER SIDING SOLUTIONS LLC

**Current Principal Place of Business:**

16114 ARMISTEAD LN  
ODESSA, FL 33556

**New Principal Place of Business:**

11705 PAINTED HILLS LANE  
TAMPA, FL 33624

**Current Mailing Address:**

16114 ARMISTEAD LN  
ODESSA, FL 33556

**New Mailing Address:**

11705 PAINTED HILLS LANE  
TAMPA, FL 33624

**FEI Number:** 26-4466444

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BOEVER, SCOTT J  
16114 ARMISTEAD LN  
ODESSA, FL 33556 US

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

BOEVER, SCOTT J  
11705 PAINTED HILLS LANE  
TAMPA, FL 33624 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: SCOTT J BOEVER

02/16/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: PRES  
Name: BOEVER, SCOTT J  
Address: 11705 PAINTED HILLS LANE  
City-St-Zip: TAMPA, FL 33624

Title: VP  
Name: BOEVER, CAROL S  
Address: 11705 PAINTED HILLS LANE  
City-St-Zip: TAMPA, FL 33624

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: SCOTT J BOEVER

PRES

02/16/2012

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