

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000123898

**FILED**  
**Apr 26, 2011**  
**Secretary of State**

**Entity Name:** VAN HILLARD SIDING CO. LLC

**Current Principal Place of Business:**

25467 NE EVANS ST  
ALTHA, FL 32421

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 85  
ALTHA, FL 32421

**New Mailing Address:**

**FEI Number:** 59-3665738

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

HILLARD, VAN G  
25467 NE EVANS ST.  
ALTHA, FL 32421 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:** MGR  
**Name:** HILLARD, VAN  
**Address:** 24567 NE EVANS ST  
**City-St-Zip:** ALTHA, FL 32421

**Title:** MGRM  
**Name:** HILLARD, JUSTIN  
**Address:** 21750 NW BLACKBOTTOM RD.  
**City-St-Zip:** ALTHA, FL 32421

**Title:** MGRM  
**Name:** JEMISON, GARY  
**Address:** 25202 FUQUA ST.  
**City-St-Zip:** ALTHA, FL 32421

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:** VAN G HILLARD

MGR

04/26/2011

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