## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # L9800000126

1. Entity Name

BEN'S PAINT SUPPLY, L.C.



FILED Apr 09, 2004 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

132 SOUTH SEGRAVE STREET DAYTONA BEACH, FL 32114

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02252004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number	Applied For	
59-3491950	Not Applicable	
5. Certificate of Status Desired	\$5.00 Additional Fee Required	

## 6. Name and Address of Current Registered Agent

EMERSON, DENNIS 132 SOUTH SEGRAVE STREET DAYTONA BEACH, FL 32114

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

the obligati	named entity submits this statement for the purpose of char ons of registered agent	nging its registered office or registered agent, or bot	h, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature: Typed or printed name of registered agent and title if applicable	(NOTE Registered Agent signature required when reinstaling)	DATE
Fi D:	ling Fee is \$50.00 ue by May 1, 2004		000400400482 94. 05794-70048-014 50400
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR EMERSON, TRENT 132 SOUTH SEGRAVE STREET DAYTONA BEACH, FL 32114		
TITLE NAME STREET ADDRESS CITY+ST+ZIP			
TITLE Name Street address City-St-Zip		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY+ST+ZIP		IN T	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
11. I hereby of indicated firmited fia	certify that the information supplied with this filing does not on this report is true and accurate and that my signature shibility company or the receiver or trustee empowered to exer	qualify for the exemption stated in Section 119 07(3)( aff have the same legal effect as if made under oath cute this report as required by Chapter 608. Florida	<li>i), Florida Statutes I further certify that the information , that I am a managing member or manager of the Statutes</li>