

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Feb 23, 2006 8:00 am**  
**Secretary of State**

02-23-2006 90228 050 \*\*\*\*50.00

**20009851**



02152006 Chg-LLC CR2E083 (11/05)

4. FEI Number  
72-1437500  
Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

DOCUMENT # M02000001884  
1. Entity Name  
SUPERIOR COATINGS OF LOUISIANA LLC



Principal Place of Business  
4715 VIKING DRIVE  
BOSSIER, LA 71111

Mailing Address  
4715 VIKING DRIVE  
BOSSIER, LA 71111

2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
1750 N. Palafox Street  
Suite, Apt. #, etc.

City & State  
Pensacola, Florida

Zip  
32501

Country  
Esambia

6. Name and Address of Current Registered Agent  
KIRK, RICHARD A  
330 FORT PICKENS RD  
12D  
PENSACOLA BEACH, FL 32561

7. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
City  
FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

Filing Fee is \$50.00  
Due by May 1, 2006

Make check payable to  
Florida Department of State

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KIRK, RICHARD 330 FORT PICKENS RD #12D PENSACOLA BEACH, FL 32561 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Richard A. Kirk 2-16-6  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #