

# **2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M06000005281

**FILED**  
**May 16, 2008**  
**Secretary of State**

**Entity Name:** NATIONS ROOF OF FLORIDA, LLC

**Current Principal Place of Business:**

1633 BLAIRS BRIDGE RD.  
LITHIA SPRINGS, GA 30122

**New Principal Place of Business:**

3311 BARTLETT BLVD.  
ORLANDO, FL 32811

**Current Mailing Address:**

1633 BLAIRS BRIDGE RD.  
LITHIA SPRINGS, GA 30122

**New Mailing Address:**

**FEI Number:** 20-5762673      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **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:**

UNITED CORPORATE SERVICES, INC.  
9200 SOUTH DADELAND BLVD., SUITE 508  
MIAMI, FL 33156 US

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

NATIONS ROOF, LLC  
3311 BARTLETT BLVD  
ORLANDO, FL 32811 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: MATT DUVAL

05/16/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: NATIONS ROOF SERVICE, , LLC  
Address: 1633 BLAIRS BRIDGE ROAD  
City-St-Zip: LITHIA SPRINGS, GA 30122

**ADDITIONS/CHANGES:**

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

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: MATT DUVAL

CONT

05/16/2008

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