

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000026941

**Entity Name:** WENDELL THOMPSON PAINTING, LLC

**Current Principal Place of Business:**

587 E. OAKRIDGE RD.  
TALLAHASSEE, FL 32305

**Current Mailing Address:**

587 E. OAKRIDGE RD.  
TALLAHASSEE, FL 32305

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

THOMPSON, WENDELL  
587 E. OAKRIDGE RD.  
TALLAHASSEE, FL 32305 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title MGRM  
Name THOMPSON, WENDELL  
Address 587 E. OAKRIDGE RD.  
City-State-Zip: TALLAHASSEE FL 32305

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** WENDELL THOMPSON

MGRM

01/09/2014

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date