2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

Apr 27, 2005 08:00 AM Secretary of State _____**___L0300043885** 1. Entity Name BEHM'S A.C. & HEATING L.L.C. Principal Place of Business Mailing Address 4141 ROCKINGHAM RD. 4141 ROCKINGHAM RD. TALLAHASSEE, FL 32303 TALLAHASSEE, FL 32303 0425200500 0 0000000 0 0 00 000 000 000 0 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3293357 Not Applicable \$5.00 acamaaa 5. Certificate of Status Desired 000000000000 6. Name and Address of Current Registered Agent BEHM, TOM DO NOT WRITE 4141 ROCKINGHAM RD. TALLAHASSEE, FL 32303 IN THIS SPACE 3. 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. Behm 1000 SIGNATURE TOM (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. TITLE MGR BEHM, TOM NAME STREET ADDRESS 4141 ROCKINGHAM RD. CITY-ST-ZIP TALLAHASSEE, FL 32303 TITLE U00000336919 04/27/05-80146-010 50.00 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CTTY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 fimited liability company or the receiver or trustee empowered to execute this report as required by Chapter 508, Florida Statutes.

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

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