2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000015238

Entity Name: LAWSON'S ELECTRICAL SERVICES, LLC.

FILED Feb 13, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3702 BELMONT BLVD. 5082 BUNYAN STREET SARASOTA, FL 34232 SARASOTA, FL 34232

Current Mailing Address: New Mailing Address:

P.O. BOX 18401 5082 BUNYAN STREET SARASOTA, FL 34276 SARASOTA, FL 34232

FEI Number: 68-0621942 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LAWSON, CHRISTOPHER L
3702 BELMONT BLVD.
SARASOTA, FL 34232 US
LAWSON, CHRISTOPHER L
5082 BUNYAN STREET
SARASOTA, FL 34232 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: CHRISTOPHER LAWSON 02/13/2007

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM Title: () Delete (X) Change () Addition LAWSON, CHRISTOPHER L LAWSON, CHRISTOPHER L Name: Name: Address: 3702 BELMONT BLVD. Address: 5082 BUNYAN STREET City-St-Zip: SARASOTA, FL 34232 City-St-Zip: SARASOTA, FL 34232

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: LAWSON, HEATHER N Name: LAWSON, HEATHER N Address: 3702 BELMONT BLVD. Address: 5082 BUNYAN STREET City-St-Zip: SARASOTA, FL 34232 City-St-Zip: SARASOTA, FL 34232

I hereby certify that the information supplied with this filing does not qualify for the 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: CHRISTOPHER LAWSON MGRM 02/13/2007