2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2003 8:00 am
Secretary of State
04-11-2003 90012 024 ****50.00

DOCUMENT # L01000007128

1. Entity Name
EXPERT ELECTRIC, L.L.C.

Principal Place of Business	Mailing Address
1039 1ST AVENUE GADSDEN, AL 35901	1039 1ST AVENUE GADSDEN, AL 35901

[X] CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
	200 BROAD ST., 3RD FLOOR
Suite, Apt. #, etc.	Suite, Apt. #, etc. SUITE B
City & State	City & State GADSDEN, AL 35901-3714
Zip / Country	Zip / Country

4. FEI Number 58-2622851 — [ ] Applied For [ ] Not Applicable

5. Certificate of Status Desired [ ] $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

COVELL, SCOTT M
ONE PENSACOLA PLAZA
125 WEST ROMANA STREET, SUITE 800
PENSACOLA, FL 32501

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

FILE NOW!!! FEE IS $50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CHRISTIAN, JAMES M 203 GOODHUE RD. GADSDEN, AL 35904	[ ] Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	 635 LESLIE LANE GADSDEN, AL 35904	[X] Change [ ] Addition
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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 limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: James Michael Christian 4/3/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #

CR2E083 (10/02)