2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Mar 14, 2006 8:00 am Secretary of State 03-14-2006 90332 001 ***275.00

DOCUMENT # L02000033162 DESÁ SPECIALTY, LLC Principal Place of Business Mailing Address *300025*09 2701 INDUSTRIAL DRIVE 2701 INDUSTRIAL DRIVE **BOWLING GREEN, KY 42101 BOWLING GREEN, KY 42101** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01062006 Chg-LLC CR2E083 (11/05) City & State City & State 4. FFI Number Applied For 04-3728143 Not Applicable Zip Country Country Zip \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 City Zip Code FL 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 little if applicable. DATE Filing Fee is \$50.00 Due by May 1, 2006 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10. TITLE TITLE ☐ Delete ☐ Change ☐ Addition HANEMAN, CHARLES NAME NAME 2701 INDUSTRIAL DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BOWLING GREEN, KY 42101 CITY-ST-ZIP VP VP Stokes, Ricky **Change** TITLE Delete TITLE Addition NAME WEIDENHAMMER, CHRIS NAME 2701' Industrial Drive STREET ADDRESS 2701 INDUSTRIAL DRIVE STREET ADDRESS Bowling Green Ky 42101 CITY-ST-ZIP BOWLING GREEN, KY 42101 CITY-ST-7IP COO ☐ Delete TITLE ☐ Change TITLE ☐ Addition NAME WIESE, JAMES NAME 2701 INDUSTRIAL DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BOWLING GREEN, KY 42101 CITY-ST-ZIP VP/CFO TITLE □ Delete TITLE ☐ Change **X** Addition NAME NAME Heidenthal, Tom 2701 industrial Drive STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7/P Bowling Green, KY 42101 TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE □ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and eccurate 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 of yustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

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

1.20,06

270.781-9600

Daytime Phone i

ATTACHMENT 30002505

DESA SUMMARY OF PAYMENTS FOR LEGAL ENTITY ANNUAL REPORTS

COMPANY	DØCUMENT NUMBER	FEI NUMBER	FEE TO FILE	CERTIFICATE OF STATUS**	
			2.5		
DESA HEATING, LLC	L02000033179 \	04-3728137	50.00	5.00	
DESA FMI, LLC	L02000033157 \	04-3728146	50.00	5.00	
DESA, LLC	L02000030058	71-0915717	50.00	5.00	
DESA IP, LLC	L02000033168	04-3728149	50.00	5.00	
DESA SPECIALTY, LLC	L02000033168	04-3728143	50.00	5.00	_
			\$ 250.00	\$ 25.00	-
TOTAL PAYMENT					\$ 275.00

^{**}Please issue Certificate of Status for each company.