2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## Mar 02, 2005 08:00 AM DOCUMENT # L03000043974 Secretary of State BARTH PUMP & SPRINKLER LLC Principal Place of Business Mailing Address 3008 BAY STREET 3008 BAY STREET SARASOTA, FL 34237 SARASOTA, FL 34237 02042005No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 36-4543149 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SCOVILL, HAROLD W DO NOT WRITE 1605 MAIN STREET 912 IN THIS SPACE SARASOTA, FL 34236 6. 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 Filing Fee is \$50.00 Due by May 1, 2005 U00000249331 03/02/05-80066-011 SO...OO MANAGING MEMBERS/MANAGERS 9. TITLE MGR BARTH, DENNIS J STREET ADDRESS 3008 BAY STREET CITY-ST-78P SARASOTA, FL 34237 NAME STREET ADDRESS CITY-ST-ZIP रारा ह STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-789 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE, NAME STREET ADDRESS CITY-ST-ZIP

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 flability company or the reserver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

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

SIGNATURE:

2-27-05

941-7261521

Daytime Phone #

FILED