2008 LIMITED LIABILITY COMPANY

FILED ANNUAL REPORT Apr 16, 2008 08:00 A Secretary of State TOCUMENT # L03000043974 **BARTH PUMP & SPRINKLER LLC** Principal Place of Business Mailing Address 3008 BAY STREET 3008 BAY STREET SARASOTA, FL 34237 SARASOTA, FL 34237 CR2E083 (12/07) 04132008 No Chg-LLC 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 IN THIS SPACE 912 SARASOTA, FL 34236 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 DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 9. TITLE MGR BARTH, DENNIS J NAME STREET ADDRESS 3008 BAY STREET CITY-ST-ZIP SARASOTA, FL 34237 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-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 exemptions contained in Chapter 119. 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 on the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

CITY-ST-ZIP