2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000045177

1. Entity Name

BOB BAGGETTE PLUMBING, LLC



Principal Place of Business

Mailing Address

1310 E. ODD FELLOW RD. FORT WALTON BEACH, FL 32547 1310 E. ODD FELLOW RD.

FORT WALTON BEACH, FL 32547

FILED Mar 09, 2005 08:00 AM Secretary of State



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03042005 No Chg-LLC CR2E083 (10/03)

4. FEI Number 59-2205126

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

JANET GENTRY CPA - PA 151 MARY ESTHER BLVD STE 405A MARY ESTHER, FL 32569

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8. The above named entity submits this st	atement for the purpose of c	hanging its regi	stered office	e or registered a	igent, or both, in the	State of Florida.	I am familiar with, and accept
the obligations of registered agent.			×			5	
• •	**- *			44.			

SIGNATURE.

Signature, typed or printed name of registered agent and title if applicable

INCTE Registered Agent signature required when reinstating

Filing Fee is \$50.00 Due by May 1, 2005

9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BAGGETTE, ROBERT D 1310 E. ODD FELLOW RD FORT WALTON BEACH, FL 32547		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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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.

TITLE NAME STREET ADDRESS CITY - ST-ZIP

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