


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 18, 2007 08:00 A
Secretary of State

DOCUMENT # L03000049224
1. Entity Name
JENNINGS SPRINKLER SYSTEM, LLC



Principal Place of Business 3524 28TH AVENUE SOUTH ST.PETERSBURG, FL 33711	Mailing Address 3524 28TH AVENUE SOUTH ST.PETERSBURG, FL 33711
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DO NOT WRITE IN THIS SPACE



04112007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 59-3265798	Applied For Not Applicable
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5. Certificate of Status Desired **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent
**JENNINGS, MITCHELL
3524 28TH AVENUE SOUTH
ST.PETERSBURG, FL 33711**

**DO NOT WRITE
IN THIS SPACE**

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

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM JENNINGS, MITCHELL 3524 28TH AVENUE SOUTH ST.PETERSBURG, FL 33711
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04/27/07-80047-007 50.00

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

SIGNATURE: *Mitchell Jennings* **4/18/2007**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #