


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 20, 2007 08:00 AM
Secretary of State

DOCUMENT # L03000049347 1. Entity Name DEWITT SPRINKLER SYSTEMS, LLC	
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Principal Place of Business 10830 NORTH SHADY HILLS POINT DUNNELLON, FL 34433 US	Mailing Address 10830 NORTH SHADY HILLS POINT DUNNELLON, FL 34433 US
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04172007No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 52-2420858	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DEWITT, WILLIAM E
 10830 NORTH SHADY HILLS POINT
 DUNNELLON, FL 34433

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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 William E Dewitt DATE 4/16/07

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	MGR DEWITT, WILLIAM E 10830 NORTH SHADY HILLS POINT DUNNELLON, FL 34433
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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: William E Dewitt DATE 4/18/07 DAYTIME PHONE # 352-465-2899

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE DATE Daytime Phone #