

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000049812

FILED
Mar 21, 2005
Secretary of State

Entity Name: DON CAMPNELL INSTALLATION, LLC

Current Principal Place of Business:

P.O. BOX 510221
MEL. BEACH, FL 32951

New Principal Place of Business:

P.O. BOX 510221
MELBOURNE BEACH, FL 329510221 US

Current Mailing Address:

P.O. BOX 510221
MEL. BEACH, FL 32951

New Mailing Address:

P.O. BOX 510221
MELBOURNE BEACH, FL 329510221 US

FEI Number: 51-0489693

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRUNN, FRANK
407 EAST NEW HAVEN AVENUE
MELBOURNE, FL 329014507 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: CAMPNELL, DON
Address: P.O. BOX 510221
City-St-Zip: MEL. BEACH, FL 32951

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CAMPNELL, DON
Address: P.O. BOX 510221
City-St-Zip: MELBOURNE BEACH, FL 329510221 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: FRANK BRUNN

RA

03/21/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date