2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L03000056574

Entity Name: CADLE INSTALLATION LLC

FILED May 15, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

965 CR 477

LAKE PANASOFFKEE, FL 33538 US

Current Mailing Address: New Mailing Address:

P.O. BOX 393

BUSHNELL, FL 33513 US

FEI Number: 56-2426279 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CADLE, TIMOTHY W 965 CR 477

LAKE PANASOFFKEE, FL 33538 US

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/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: () Change () Addition

 Name:
 CADLE, MICHAEL J
 Name:

 Address:
 17890 SE 30TH AVENUE
 Address:

 City-St-Zip:
 SUMMERFEILD, FL 34491
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 CADLE, TIMOTHY W
 Name:

 Address:
 965 CR 477
 Address:

 City-St-Zip:
 LAKE PANASOFFKEE, FL 33538 US
 City-St-Zip:

Title: () Delete Title: MGR () Change (X) Addition

Name: Name: MCCANN, CHRISTOPHER M

Address: Address: 8555 NE 305 AVN

City-St-Zip: City-St-Zip: SALT SPRINGS, FL 32134 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: TIMOTHY W. CADLE MGRM 05/15/2006