

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 13, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000056645

1. Entity Name
BAKER AND GRESHAM INSTALLATIONS LLC



Principal Place of Business
**211 DUE EAST AVENUE
NEW SMYRNA BEACH, FL 32169 US**

Mailing Address
**211 DUE EAST AVENUE
NEW SMYRNA BEACH, FL 32169 US**



03012005No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0536300

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BAKER, DAVID G
211 DUE EAST AVENUE
NEW SMYRNA BEACH, FL 32169**

**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 _____

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

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
**MGR
BAKER, DAVID G
211 DUE EAST AVENUE
NEW SMYRNA BEACH, FL 32169**

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
**MGR
GRESHAM, TY W
211 DUE EAST AVENUE
NEW SMYRNA BEACH, FL 32169**

TITLE
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CITY ST ZIP

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04/13/05-80102-020 50.00

**DO NOT WRITE
IN THIS SPACE**

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 606, Florida Statutes.

SIGNATURE: _____

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

DAVID G. BAKER