2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 25, 2006
Secretary of State

DOCUMENT# L04000022971

Entity Name: ALLEN ROBERTS AIR CONDITIONING & REFRIGERATION LLC

Current Principal Place of Business:

50 BEAL PARKWAY SW
SUITE #5
FT WALTON BEACH, FL 32548

New Principal Place of Business:

245 NW HOLLYWOOD BLVD.
FT WALTON BEACH, FL 32548

Current Mailing Address:

50 BEAL PARKWAY SW
SUITE #5
FT WALTON BEACH, FL 32548

New Mailing Address:

245 HOLLYWOOD BLVD.
FT WALTON BEACH, FL 32548

FEI Number: 20-1174801 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLIAM ALLEN ROBERTS
153 RAINBOW DR NW
FT WALTON BEACH, FL 32548 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/MANAGERS:

Title: MGR ( ) Delete
Name: ROBERTS, WILLIAM A
Address: 153 RAINBOW DR. NW
City-St-Zip: FORT WALTON BEACH, FL 32548

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: WILLIAM ALLEN ROBERTS MGR. 01/25/2006

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