2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 21, 2005
Secretary of State

DOCUMENT# L04000029641

Entity Name: J & J ROOF CLEANING & PRESSURE WASHING LLC

Current Principal Place of Business:

PO BOX 844
WALDO, FL 32694

New Principal Place of Business:

Current Mailing Address:

PO BOX 844
WALDO, FL 32694

New Mailing Address:

FEI Number: 59-3664777 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

A1A REGISTERED AGENT INC.
92 SADBERRY ROAD
QUINCY, FL 32351 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: MGRM ( ) Delete
Name: POWELL, WILLIAM JASON
Address: 3815 N.W. 21 DRIVE
City-St-Zip: GAINESVILLE, FL 32605

Title: MGRM ( ) Delete
Name: DAVIS, JASON DALE
Address: 3815 N.W. 21 DRIVE
City-St-Zip: GAINESVILLE, FL 32605

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: POWELL, WILLIAM JASON
Address: 17122 N.E 120 AVE.
City-St-Zip: WALDO, FL 32694

Title: MGRM (X) Change ( ) Addition
Name: DAVIS, JASON DALE
Address: 2811 N.W. 32 ST.
City-St-Zip: GAINESVILLE, FL 32605

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: W. JASON POWELL MGRM 08/21/2005

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