## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## **DOCUMENT # L04000034526**

1. Entity Name

LOXAHATCHEE ELECTRICAL SERVICES L.L.C.



FILED Jan 18, 2007 08:00 AM Secretary of State

Principal Place of Business

16897 75TH PL N LOXAHATCHEE, FL 33470 Mailing Address

16897 75TH PL N LOXAHATCHEE, FL 33470



01142007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 74-3123453 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

JARVIS, EMMETT W 16897 75TH PL N LOXAHATCHEE, FL 33470

## DO NOT WRITE IN THIS SPACE

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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 Fiorida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE Signature, typed or printed name of registered agent and title # applicable. (NOTE: Register			ol signatura required when reinstaling)	DATE	_
Filing Fee is \$50.00 Due by May 1, 2007				U00000592218 01/19/07-80054-016 50.00	*
9.	MANAGING MEMBERS/MANAGERS				
TITLE	MGRM				
NAME	JARVIS, EMMETT W	The state of the s			
STREET ADDRESS	16897 75TH PL N	ŀ			
CITY-ST-ZIP	LOXAHATCHEE, FL 33470	ŀ			
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 receipter or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

BIGNATURE AND TYPED OR PRINTED NAME OF BIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1/14/2007

Daytime Phone #