2006 LIMITED LIABILITY COMPANY

ANNUAL REPORT

DOCUMENT # L04000039047 BAYPOINT AIR CONDITIONING LLC

Principal Place of Business

Mailing Address

2806 W OHIO AVE TAMPA, FL 33607-6719 2806 W OHIO AVE TAMPA, FL 33607-6719

FILED Apr 03, 2006 08:00 AM Secretary of State



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03152006No Chg-LLC

CR2E083 (11/05)

4. FEI Number NOT APPLICABLE

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SCARDINO, JEROME A 2806 W OHIO AVE TAMPA, FL 33607-6719

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 The above named entity submits this statement for the purpose of change the obligations of registered agent. 	ng its registered office or registered agent, or both, in	the State of Florida, I am familiar with, and accept
SIGNATURE Stor stove, types or provide name of recisional agent and life if applicable	(NOT) Registered Agent signature required when teinstating	DATE

Filing Fee is \$50.00 Due by May 1, 2006

9.	MANAGING MEMBERS/MANAGERS
NILE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SCARDINO, JEROME A 2806 W OHIO AVE TAMPA, FL 336076719
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
THILE NAME STREET MODRESS CITY-ST-ZIP	
ISSEE NAME STREET ADDRESS CITY-ST-ZIP	
THEE NAME STREET ADDRESS ETTY-ST-ZIP	
TITLE NAME STREET ADBRESS	

U00000489989 04/18/06-80036-022 55.00

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11. I hereby certify that the information supplied with this filling 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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANASTIG MEMBER, OR AUTHORIZED RES SIGNATURE: TEROME A. SCARDING