

2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L04000067148

Entity Name: 1ST CLASS PLUMBING, LLC

FILED
Jun 23, 2006
Secretary of State

Current Principal Place of Business:

5562 HAYDEN BLVD
SARASOTA, FL 34232

New Principal Place of Business:

5419 FOXWOOD DR.
SARASOTA, FL 34232

Current Mailing Address:

5562 HAYDEN BLVD
SARASOTA, FL 34232

New Mailing Address:

5419 FOXWOOD DR.
SARASOTA, FL 34232

FEI Number: 20-1455089

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, RYAN W
5562 HAYDEN BLVD.
SARASOTA, FL 34232 US

Name and Address of New Registered Agent:

BROWN, RYAN W
5419 FOXWOOD DR.
SARASOTA, FL 34232 US

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: RYAN W. BROWN

06/23/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: PRES () Delete
Name: BROWN, RYAN W
Address: 5562 HAYDEN BLVD
City-St-Zip: SARASOTA, FL 34232

Title: VP () Delete
Name: CHRIS, BROWN L
Address: 115 VERONA ST. N.
City-St-Zip: NOKOMIS, FL 34275

ADDITIONS/CHANGES:

Title: PRES (X) Change () Addition
Name: BROWN, RYAN W
Address: 5419 FOXWOOD DR.
City-St-Zip: SARASOTA, FL 34232

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: RYAN W. BROWN

PRES

06/23/2006

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