2008 LIMITED LIABILITY COMPANY

FILED Apr 17, 2008 08:00 A Secretary of State **ANNUAL REPORT** DOCUMENT # L04000071153 DAVE LEWIS INSTALLATION LLC Principal Place of Business Mailing Address 333 OKALOOSA ROAD 333 OKALOOSA ROAD FORT WALTON BEACH, FL 32548 FORT WALTON BEACH, FL 32548 03312008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-1691696 Not Applicable \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent DO NOT WRITE LEIWS, RAYMOND D 333 OKALOOSA ROAD FORT WALTON BEACH, FL 32548 IN THIS SPACE 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 Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!!-FEE:18:\$138:75-2 After: May:1, 2008 Fee will be \$538.75 9. MANAGING MEMBERS/MANAGERS MGRM TITLE NAME LEWIS, RAYMOND D STREET ADDRESS 333 OKALOOSA ROAD CITY-ST-ZIP FORT WALTON BEACH, FL 32548 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-7IP

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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY+ST-7(P