

# 2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000003092

Entity Name: BRYANT ELECTRIC, L.L.C.

FILED  
Feb 28, 2006  
Secretary of State

## Current Principal Place of Business:

217 SW DAYLIGHT LOOP  
LAKE CITY, FL 32024

## New Principal Place of Business:

## Current Mailing Address:

217 SW DAYLIGHT LOOP  
LAKE CITY, FL 32024

## New Mailing Address:

FEI Number: 20-2106014

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WILKES, BRAD  
217 SW DAYLIGHT LOOP  
LAKE CITY, FL 32024 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: WILKES, BRAD  
Address: 217 SW DAYLIGHT LP  
City-St-Zip: LAKE CITY, FL 32024

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR ( ) Change (X) Addition  
Name: BRYANT, JERRY W  
Address: 2129 NW 82ND TERRACE  
City-St-Zip: BELL, FL 32619

Title: MGR ( ) Change (X) Addition  
Name: DUKES, MATTHEW C  
Address: 289 SE CEDER LP  
City-St-Zip: LAKE CITY, FL 32024

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: BRAD W WILKES

MGRM

02/28/2006

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