

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000014103

FILED
Jan 03, 2006
Secretary of State

Entity Name: SENTELL'S ELECTRICAL SERVICE, LLC

Current Principal Place of Business:

2637 WISTERIA PL.
SARASOTA, FL 34239 US

New Principal Place of Business:

Current Mailing Address:

2637 WISTERIA PL.
SARASOTA, FL 34239 US

New Mailing Address:

FEI Number: 51-0535037

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SENTELL, JOSEPH A
30 BAYVIEW DR
OSPREY, FL 34229 US

Name and Address of New Registered Agent:

SENTELL, JOSEPH A
2637 WISTERIA PL.
SARASOTA, FL 34239 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: JOSEPH A. SENTELL

01/03/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SENTELL, JOSEPH A
Address: 30 BAYVIEW DR
City-St-Zip: OSPREY, FL 34229 US

Title: MGRM () Delete
Name: RAMER, REBECCA
Address: 2637 WISTERIA PL.
City-St-Zip: SARASOTA, FL 34239 US

Title: MGRM () Delete
Name: HUSSEY, ALLAN M
Address: 921 FAITH CIR. EAST 56TH
City-St-Zip: BRADENTON, FL 34212

ADDITIONS/CHANGES:

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

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

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: REBECCA N. RAMER

MGRM

01/03/2006

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