2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 28, 2006
Secretary of State

DOCUMENT# L05000032782

Entity Name: JAMES & ELLIS MECHANICAL GROUP, LLC

Current Principal Place of Business:

414 SW 140TH TERRACE
NEWBERRY, FL 32669

New Principal Place of Business:

Current Mailing Address:

414 SW 140TH TERRACE
NEWBERRY, FL 32669

New Mailing Address:

10323 SW 48TH PLACE
GAINESVILLE, FL 32608

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CHANDLER, JAMES R III
1834 MAIN STREET
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

BLEKE, JAMES E
10323 SW 48TH PLACE
GAINESVILLE, FL 32608 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: JAMES E. BLEKE 02/28/2006
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: BLEKE, JAMES E
Address: 414 SW 140TH TERRACE
City-St-Zip: NEWBERRY, FL 32669

Title: MGRM ( ) Delete
Name: BLEKE, MARLEAH R
Address: 414 SW 140TH TERRACE
City-St-Zip: NEWBERRY, FL 32669

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: BLEKE, JAMES E
Address: 10323 SW 48TH PLACE
City-St-Zip: GAINESVILLE, FL 32608

Title: MGRM (X) Change ( ) Addition
Name: BLEKE, MARLEAH R
Address: 10323 SW 48TH PLACE
City-St-Zip: GAINESVILLE, FL 32608

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: JAMES E. BLEKE MGR 02/28/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date