

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000045606

FILED
Apr 19, 2007
Secretary of State

Entity Name: FLORIDA STORM PROTECTION UNLIMITED LLC

Current Principal Place of Business:

1700 WOOLBRIGHT ROAD, SUITE 7
BOYNTON BEACH, FL 33426

New Principal Place of Business:

525 SOUTH FLAGLER AVENUE
POMPANO BEACH, FL 33060

Current Mailing Address:

1700 WOOLBRIGHT ROAD, SUITE 7
BOYNTON BEACH, FL 33426

New Mailing Address:

525 SOUTH FLAGLER AVENUE
POMPANO BEACH, FL 33060

FEI Number: 20-2847808

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: MGR () Delete
Name: DANTO, CRAIG S
Address: 1700 WOOLBRIGHT ROAD, SUITE 7
City-St-Zip: BOYNTON BEACH, FL 33426

Title: MGR () Delete
Name: DEIOMA, DEBORAH
Address: 1700 WOOLBRIGHT ROAD, SUITE 7
City-St-Zip: BOYNTON BEACH, FL 33426

Title: MGR () Delete
Name: FRANGOS, SHAWN
Address: 1700 WOOLBRIGHT ROAD, SUITE 7
City-St-Zip: BOYNTON BEACH, FL 33426

Title: MGR (X) Delete
Name: FRANGOS, TIMOTHY
Address: 1700 WOOLBRIGHT ROAD, SUITE 7
City-St-Zip: BOYNTON BEACH, FL 33426

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: FRANGOS, TIMOTHY
Address: 525 SOUTH FLAGLER AVENUE
City-St-Zip: POMPAÑO BEACH, FL 33060

Title: MGR (X) Change () Addition
Name: FRANGOS, SHAWN
Address: 525 SOUTH FLAGLER AVENUE
City-St-Zip: POMPAÑO BEACH, FL 33060

Title: MGR (X) Change () Addition
Name: FRANGOS, JAMES
Address: 525 SOUTH FLAGLER AVENUE
City-St-Zip: POMPAÑO BEACH, FL 33060

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: SHAWN FRANGOS

MGR

04/19/2007

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