2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000058492

Entity Name: BUONARROTI INSTALLATIONS, LLC

FILED May 01, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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136 S HOLIDAY RD SUITE B DESTIN, FL 32550 US

Current Mailing Address: New Mailing Address:

136 S HOLIDAY RD SUITE B DESTIN, FL 32550 US

FEI Number: 01-0839103 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BUSHONG, CHARLES B 320 SCENIC GULF DRIVE UNIT 224 DESTIN, FL 32550 US

MANAGING MEMBERS/MANAGERS:

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

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ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: BUSHONG, CHARLES B Name: BUSHONG, CHARLES B

Name: BUSHONG, CHARLES B Name: BUSHONG, CHARLES B Address: 320 SCENIC GULF DRIVE UNIT 224 Address: 136 SOUTH HOLIDAY ROAD SUITE G

City-St-Zip: DESTIN, FL 32550 US City-St-Zip: DESTIN, FL 32550 US

Title: MGRM (X) Delete Title: () Change () Addition

 Name:
 SIMAC, ROBERT A
 Name:

 Address:
 60 SAND PRINTS DR UNIT A7
 Address:

 City-St-Zip:
 DESTIN, FL 32550 US
 City-St-Zip:

Title: MGRM (X) Delete Title: () Change () Addition Name: MCDONALD, JOE M Name:

 Name:
 MCDONALD, JOE M
 Name:

 Address:
 60 SAND PRINTS DR UNIT E10
 Address:

 City-St-Zip:
 DESTIN, FL 32550 US
 City-St-Zip:

Title: MGRM (X) Delete Title: () Change () Addition

 Name:
 SLOAN, JUSTIN J
 Name:

 Address:
 239 INDIAN WOMAN RD.
 Address:

 City-St-Zip:
 SANTA ROSA BCH, FL 32459 US
 City-St-Zip:

Title: MGRM (X) Delete Title: () Change () Addition

 Name:
 JONES, JOHNNY R
 Name:

 Address:
 480 MUSSET BAYOU RD.
 Address:

 City-St-Zip:
 SANTA ROSA BCH, FL 32459 US
 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: CHARLES BUSHONG MGRM 05/01/2006