

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000058942

**FILED**  
**Feb 27, 2006**  
**Secretary of State**

**Entity Name:** ELLIS AKINS INSTALLATIONS LLC

**Current Principal Place of Business:**

8091 HARTINGTON DR  
NAVARRE, FL 32566

**New Principal Place of Business:**

578 RADIANT CIRCLE  
MARY ESTHER, FL 32569

**Current Mailing Address:**

8091 HARTINGTON DR  
NAVARRE, FL 32566

**New Mailing Address:**

578 RADIANT CIRCLE  
MARY ESTHER, FL 32569

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

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

AKINS, ELLIS F  
8091 HARTINGTON DR  
NAVARRE, FL 32566    US

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

AKINS, ELLIS F  
578 RADIANT CIRCLE  
MARY ESTHER, FL 32569    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: \_\_\_\_\_

02/27/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title:            MR            ( ) Delete  
Name:           AKINS, ELLIS F  
Address:        8091 HARTINGTON DR  
City-St-Zip:    NAVARRE, FL 32566

**ADDITIONS/CHANGES:**

Title:            MR            (X) Change ( ) Addition  
Name:           AKINS, ELLIS F  
Address:        578 RADIANT CIRCLE  
City-St-Zip:    MARY ESTHER, FL 32569

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: ELLIS F. AKINS

MR

02/27/2006

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