## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000062236

Name:

Address:

City-St-Zip:

6405 SYCAMORE STREET

MILTON, FL 32570 US

Entity Name: BRADSHAW INSTALLATION LLC

Apr 24, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 6405 SYCAMORE STREET MILTON, FL 32570 US **Current Mailing Address: New Mailing Address:** P O BOX 4812 MILTON, FL 32572 US FEI Number: 20-3028166 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BRADSHAW, JEANNE M 6405 SYCAMORE STREET MILTON, FL 32570 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: ADDITIONS/CHANGES: Title: () Change () Addition () Delete BRADSHAW, CHARLES E SR Name: Name: Address: 6405 SYCAMORE STREET Address: City-St-Zip: MILTON, FL 32570 US City-St-Zip: Title: ASST ( ) Delete Title: () Change () Addition Name: BRADSHAW, CHARLES E JR Name: Address: 6405 SYCAMORE STREET Address: City-St-Zip: MILTON, FL 32570 US City-St-Zip: Title: SEC ( ) Delete Title: SEC (X) Change ( ) Addition THAMES, JAMES D JR Name: COX, EUGENE D Name: 5714 BYRUM STREET 8804 HIGHWAY 87 NO Address: Address: City-St-Zip: MILTON, FL 32570 US City-St-Zip: MILTON, FL 32570 US ( ) Delete Title: TREA Title: () Change () Addition BRADSHAW, JEANNE M

I hereby certify that the information supplied with this filing does not qualify 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.

Name:

Address:

City-St-Zip:

SIGNATURE: JEANNE M BRADSHAW 04/24/2009