

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000098479

FILED  
Mar 16, 2008  
Secretary of State

Entity Name: ALLPRO INSTALLATION, LLC

**Current Principal Place of Business:**

3916 ROYAL PALM DRIVE  
BRADENTON, FL 34210

**New Principal Place of Business:**

**Current Mailing Address:**

3916 ROYAL PALM DRIVE  
BRADENTON, FL 34210

**New Mailing Address:**

FEI Number: 20-3585383

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WOJCULEWSKI, STEPHEN E  
3916 ROYAL PALM DRIVE  
BRADENTON, FL 34210 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: P ( ) Delete  
Name: WOJCULEWSKI, STEPHEN E  
Address: 3916 ROYAL PALM DR WEST  
City-St-Zip: BRADENTON, FL 34210

Title: VP ( ) Delete  
Name: WOJULEWSKI, MICHAEL S  
Address: 3916 ROYAL PALM DR WEST  
City-St-Zip: BRADENTON, FL 34210

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: O ( ) Change (X) Addition  
Name: SLEZAK, JONATHAN  
Address: 3916 ROYAL PALM DRIVE  
City-St-Zip: BRADENTON, FL 34210

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.

SIGNATURE: STEPHEN E WOJCULEWSKI

P

03/16/2008

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