

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000040661

FILED  
Apr 27, 2007  
Secretary of State

**Entity Name:** ADVANCED INSTALLED PRODUCTS, LLC

**Current Principal Place of Business:**

2014 E. ADAMS STREET  
JACKSONVILLE, FL 32202

**New Principal Place of Business:**

**Current Mailing Address:**

2014 E. ADAMS STREET  
JACKSONVILLE, FL 32202

**New Mailing Address:**

**FEI Number:** 20-4732412

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GRAY, CATHERINE J  
2014 E. ADAMS STREET  
JACKSONVILLE, FL 32202 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

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

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

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

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Change (X) Addition  
Name: WILSON, JOHN S  
Address: 4446 HENDRICKS AVE SUITE 412  
City-St-Zip: JACKSONVILLE, FL 32207

Title: M ( ) Change (X) Addition  
Name: WILSON, COURTENAY S  
Address: 331 PONTE VEDRA BLVD  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: MGR ( ) Change (X) Addition  
Name: FRANK, JIM J  
Address: 2014 EAST ADAMS ST  
City-St-Zip: JACKSONVILLE, FL 32202

Title: MGR ( ) Change (X) Addition  
Name: TURVEY, SUSAN H  
Address: 2014 EAST ADAMS ST  
City-St-Zip: JACKSONVILLE, FL 32202

Title: MGR ( ) Change (X) Addition  
Name: GRAY, CATHERINE J  
Address: 2014 EAST ADAMS ST  
City-St-Zip: JACKSONVILLE, FL 32202

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: CATHERINE J GRAY

MGR

04/27/2007

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