2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000029656

Entity Name: PAR INSTALLATIONS,LLC

FILED Apr 14, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

9480 PRINCESTON SQUARE BLVD. S 7620 BAYMEADOWS CIRCLE WEST

1704 2236

JACKSONVILLE, FL 32256 US JACKSONVILLE, FL 32256 US

Current Mailing Address: New Mailing Address:

9480 PRINCESTON SQUARE BLVD. S P.O. BOX 550801

1704 JACKSONVILLE, FL 32255 US JACKSONVILLE, FL 32256 US

FEI Number: 71-1029279 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SCHAEFER, MICHAEL J SR.
9480 PRINCESTON SQUARE BLVD. S.
1704

SCHAEFER, MICHAEL J SR.
7620 BAYMEADOWS CIRCLE WEST
2236

JACKSONVILLE, FL 32256 US JACKSONVILLE, FL 32256 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: 04/14/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR. () Delete Title: MGR. (X) Change () Addition Name: SCHAEFER, MICHAEL J SR Name: SCHAEFER, MICHAEL J SR

Address: 9480 PRINCESTON SQUARE BLVD. S. Address: 7620 BAYMEADOWS CIRCLE WEST #2236

City-St-Zip: JACKSONVILLE, FL 32256 US City-St-Zip: JACKSONVILLE, FL 32256 US

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: MICHAEL J. SCHAEFER OWNE 04/14/2008