

2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L96000000048

FILED
Feb 08, 2007
Secretary of State

Entity Name: SOLAR, L.C.

Current Principal Place of Business:

2664 AIRPORT RDS.
11
NAPLES, FL 34112

New Principal Place of Business:

2664 AIRPORT RDS.
NAPLES, FL 34112

Current Mailing Address:

2664 AIRPORT RDS.
11
NAPLES, FL 34112

New Mailing Address:

2664 AIRPORT RDS.
NAPLES, FL 34112

FEI Number: 65-0650348

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KELLY, CHARLES M JR.
KELLY PASSIDOMO ALBA & CASSNER, LLP
2390 TAMiami TRAIL NORTH, SUITE 204
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

CURTIS CASSNER REGISTERED AGENT, LLC
2664 AIRPORT ROAD S
NAPLES, FL 34112 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: CURTIS CASSNER

02/08/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: TAISHOFF, LAWRENCE B
Address: 2664 AIRPORT RD S #11
City-St-Zip: NAPLES, FL 34112

Title: MGRM (X) Delete
Name: TAISHOFF, ROBERT P
Address: 309 MARTINS COVE RD
City-St-Zip: ANNAPOLIS, MD 21401

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: TAISHOFF, ROBERT P
Address: 2664 AIRPORT RD S
City-St-Zip: NAPLES, FL 34112

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

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: ROBERT P. TAISHOFF

MGRM

02/08/2007

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