

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 06, 2006 8:00 am
Secretary of State

03-06-2006 90200 043 ****50.00

20013258



DOCUMENT # M00000000238 1. Entity Name DIGITAL INSTALLATIONS, LLC					
Principal Place of Business 1155 PEACHTREE ST., N.E., STE. 1800 ATLANTA, GA 30309-3610			Mailing Address 1155 PEACHTREE ST., N.E., STE. 1800 ATLANTA, GA 30309-3610		
2. Principal Place of Business 754 Peachtree Street, NE		3. Mailing Address			
Suite, Apt. #, etc. Suite D1481		Suite, Apt. #, etc.			
City & State Atlanta, GA 30308-1206		City & State			
Zip Country USA		Zip Country		4. FEI Number NOT APPLICABLE	
5. Certificate of Status Desired <input type="checkbox"/>		Applied For Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required					
6. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET TALLAHASSEE, FL 32301			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DYKES, RONALD M 1155 PEACHTREE STREET NE ATLANTA, GA 30309 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR W. Patrick Shannon 1155 Peachtree Street, NE, #2008 Atlanta, GA 30309-3610 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PMGR GRANGER, DONALD R 754 PEACHTREE ST STE D 1481 ATLANTA, GA 303081206 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SMITH, WILLIAM L 675 W. PEACHTREE STREET, NW #4515 ATLANTA, GA 30375 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSGC NAULT, II, J. LLOYD SUITE 4300 675 W. PEACHTREE STREET ATLANTA, GA 30375 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSGC Thompson T. Rawls, II 2180 Lake Boulevard, NE, #120 Atlanta, GA 30319-6004 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT DROEGE, MARK E 1155 PEACHTREE ST NE STE 1704 ATLANTA, GA 30309 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Suite 1703 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS IRVINE, JOYCE C 1155 PEACHTREE ST. NE ATLANTA, GA 30309 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: <u>Joyce Clower Irvine</u> 2/28/06 (404) 249-4450 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>					

Joyce Clower Irvine, Assistant Secretary