

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000087794

**FILED**  
**Apr 07, 2010**  
**Secretary of State**

**Entity Name:** PROFESSIONAL HOME IMPROVEMENT AIR CONDITIONING AND REFRIGERATION LLC.

**Current Principal Place of Business:**

81 E CYPRESS BLVD  
HOMOSASSA, FL 34428 US

**New Principal Place of Business:**

81 E CYPRESS BLVD  
HOMOSASSA, FL 34446 US

**Current Mailing Address:**

81 E CYPRESS BLVD  
HOMOSASSA, FL 34428 US

**New Mailing Address:**

81 E CYPRESS BLVD  
HOMOSASSA, FL 34446 US

FEI Number: 74-3229659

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WALLEY, SHANNON J  
81 E CYPRESS BLVD  
HOMOSASSA, FL 34428 US

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

WALLEY, SHANNON J  
81 E CYPRESS BLVD  
HOMOSASSA, FL 34446 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/07/2010

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MR  
Name: WALLEY, SHANNON J  
Address: 81 E CYPRESS BLVD  
City-St-Zip: HOMOSASSA, FL 34446

I hereby 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: SHANNON J. WALLEY

MR

04/07/2010

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