

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000092414

**FILED**  
**Jan 19, 2012**  
**Secretary of State**

**Entity Name:** RECOMMENDED MECHANICAL SERVICES, "LLC"

**Current Principal Place of Business:**

18746 US HWY 19 NORTH  
UNIT D  
CLEARWATER, FL 33764 US

**New Principal Place of Business:**

**Current Mailing Address:**

1527 BAY VIEW STREET  
TARPON SPRINGS, FL 34689 US

**New Mailing Address:**

FEI Number: 27-3106164

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MACOMBER, CHAD T  
1527 BAY VIEW STREET  
TARPON SPRINGS, FL 34689 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: MGR  
Name: MACOMBER, CHAD T  
Address: 1527 BAY VIEW STREET  
City-St-Zip: TARPON SPRINGS, FL 34689 US

Title: MGRM  
Name: BRENZO, JOSEPH D  
Address: 1919 SUTHERLAND DRIVE  
City-St-Zip: PALM HARBOR, FL 34683 US

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: CHAD T MACOMBER

MGR

01/19/2012

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