## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M01000000008

Entity Name: CARRIER SALES AND DISTRIBUTION, LLC

FILED Apr 11, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
CARRIER PKWY. SYRACUSE, NY 13221				CARRIER PARKWAY BUILDING TR-4 SYRACUSE, NY 13221		
Current Mailing Address:				New Mailing Address:		
CARRIER PKWY. LEGAL DEPT., TR-4 SYRACUSE, NY 13221				CARRIER PARKWAY BUILDING TR-4 SYRACUSE, NY 13221		
FEI Number:	: 06-1519509	FEI Number Applied For ( )	FEI Nun	nber Not App	licable ( )	Certificate of Status Desired ( )
Name and	Address of C	urrent Registered Agent:		Name and	Address of N	New Registered Agent:
1200 SOU PLANTATI The above	PORATION SYSTH PINE ISLANION, FL 33324  named entity set of Florida.	ND ROAD US	ourpose o	f changing i	ts registered c	office or registered agent, or both,
SIGNATURE: Electronic Signature of Registered Agent				Date		
MANAGING MEMBERS/MANAGERS:				ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip: Title: Name: Address:	HERMAN, PHIL CARRIER PAR SYRACUSE, N	<b>WAY</b>		Title: Name: Address: City-St-Zip: Title: Name: Address:	MEYERS, DAV CARRIER PAR SYRACUSE, N	KWAY Y 13221 ) Change (X) Addition IALD K VP
City-St-Zip:				City-St-Zip:	SYRACUSE, N	
Title: Name: Address: City-St-Zip:	( )	Delete		Title: Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	( )	Delete		Title: Name: Address: City-St-Zip:	ASEC ( HALL, DEBORA CARRIER PAR SYRACUSE, N	KWAY
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	DIR ( BORIES, JACC CARRIER PAR SYRACUSE, N	KWAY
Title: Name: Address: City-St-Zip:	( )	Delete		Title: Name: Address: City-St-Zip:	DIR ( BULLOCK, STE CARRIER PAR SYRACUSE N	KWAY

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: DEB HALL ASEC 04/11/2008