

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000000008

FILED
Apr 26, 2011
Secretary of State

Entity Name: CARRIER ENTERPRISE, LLC

Current Principal Place of Business:

2000 PARKS OAKS AVENUE
ORLANDO, FL 32808

New Principal Place of Business:

2000 PARK OAKS AVENUE
ORLANDO, FL 32808

Current Mailing Address:

C/O WATSCO INC.
2665 SOUTH BAYSHORE DRIVE, SUITE 901
COCONUT GROVE, FL 33133

New Mailing Address:

FEI Number: 06-1519509 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: MVP
Name: LOGAN, BARRY S
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 901
City-St-Zip: COCONUT GROVE, FL 33133

Title: MVPS
Name: MENENDEZ, ANA M
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 901
City-St-Zip: COCONUT GROVE, FL 33133

Title: MCEO
Name: COMBS, STEPHEN R
Address: 2000 PARKS OAKS AVE.
City-St-Zip: ORLANDO, FL 32808

Title: P
Name: MEYERS, DAVID
Address: 2000 PARKS OAKS AVE.
City-St-Zip: ORLANDO, FL 32808

Title: MGR
Name: MCDONOUGH, ROBERT
Address: 2000 PARKS OAKS AVE.
City-St-Zip: ORLANDO, FL 32808

Title: MGR
Name: BORIES, JACQUES
Address: 2000 PARKS OAKS AVE.
City-St-Zip: ORLANDO, FL 32808

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: EFY DISTEFANO

AT

04/26/2011

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