

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000001950

FILED
Jan 07, 2005
Secretary of State

Entity Name: CBRE TECHNICAL SERVICES, LLC

Current Principal Place of Business:

555 ANTON BLVD., 10TH FLOOR
COSTA MESA, CA 92626

New Principal Place of Business:

Current Mailing Address:

% EMCOR GROUP, INC.
301 MERRITT SEVEN
NORWALK, CT 06851

New Mailing Address:

FEI Number: 04-3507926

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/MEMBERS:

Title: MGR () Delete
Name: TURNER, JANA
Address: 5000 BIRCH STREET, SUITE 9000
City-St-Zip: NEWPORT BEACH, CA 92660

Title: MGR () Delete
Name: RANDOLPH, RICHARD L
Address: 5000 BIRCH STREET, SUITE 9000
City-St-Zip: NEWPORT BEACH, CA 92660

Title: MGR () Delete
Name: CLICK, ROBERT L
Address: 5000 BIRCH STREET, SUITE 9000
City-St-Zip: NEWPORT BEACH, CA 92660

Title: MGR () Delete
Name: FOSTER, TREVOR M
Address: 301 MERRITT SEVEN
City-St-Zip: NORWALK, CT 06851

Title: MGR (X) Delete
Name: SHAKER, ANTHONY
Address: 306 NORTHERN AVENUE
City-St-Zip: BOSTON, MA 02205

Title: MGR () Delete
Name: TRIANO, ANTHONY
Address: 301 MERRITT SEVEN
City-St-Zip: NORWALK, CT 06851

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: DAVIS, JOHN
Address: 5000 BIRCH STREET, SUITE 9000
City-St-Zip: NEWPORT BEACH, CA 92660

Title: MGR (X) Change () Addition
Name: RODGERS, WILLIAM A JR.
Address: 320 23RD STREET SOUTH, SUITE 100
City-St-Zip: ARLINGTON, VA 22202

Title: MGR (X) Change () Addition
Name: MATZ, R. KEVIN
Address: 301 MERRITT SEVEN
City-St-Zip: NORWALK, CT 06851

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ANTHONY TRIANO

MGR

01/07/2005

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