

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000055845

**FILED**  
**Jan 09, 2014**  
**Secretary of State**  
**CC6174605142**

**Entity Name:** AMERICAN BACKFLOW INSPECTIONS, LLC

**Current Principal Place of Business:**

6432 GARDENIA STREET  
PANAMA CITY, FL 32404

**Current Mailing Address:**

6432 GARDENIA STREET  
PANAMA CITY, FL 32404 US

**FEI Number:** 45-5195896

**Certificate of Status Desired:** No

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

FOWLER, KENNETH  
6432 GARDENIA STREET  
PANAMA CITY, FL 32404 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

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name FOWLER, HEIDI  
Address 6432 GARDENIA STREET  
City-State-Zip: PANAMA CITY FL 32404

Title MGRM  
Name FOWLER, KENNETH  
Address 6432 GARDENIA STREET  
City-State-Zip: PANAMA CITY FL 32404

Title MGRM  
Name WHITFIELD, DOUGLAS  
Address 4423 COLLEGE STATION RD  
City-State-Zip: PANAMA CITY FL 32404

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** KENNETH FOWLER

MGRM/OWNER

01/09/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date