

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000178118

**Entity Name:** ADMIRAL ACQUISITION SUB LLC

**Current Principal Place of Business:**

3820 AMERICAN DRIVE  
SUITE 200  
PLANO, TX 75075

**FILED**  
**Mar 12, 2019**  
**Secretary of State**  
**1084627906CC**

**Current Mailing Address:**

3820 AMERICAN DRIVE  
SUITE 200  
PLANO, TX 75075 US

**FEI Number: 36-4905656**

**Certificate of Status Desired: No**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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 MEMBER  
Name SERVICE EXPERTS HEATING & AIR  
CONDITIONING  
Address 3820 AMERICAN DRIVE  
SUITE 200  
City-State-Zip: PLANO TX 75075

Title MANAGER  
Name PEAK, SCOTT  
Address 3820 AMERICAN DRIVE  
SUITE 200  
City-State-Zip: PLANO TX 75075

Title CFO  
Name WENAAS, CHRISTOPHER  
Address 3820 AMERICAN DRIVE  
SUITE 200  
City-State-Zip: PLANO TX 75075

Title SVP, SECRETARY  
Name CROWE, ANNE S.  
Address 3820 AMERICAN DRIVE  
SUITE 200  
City-State-Zip: PLANO TX 75075

Title PRESIDENT, COO  
Name MCKEEN, IAN L.  
Address 3820 AMERICAN DRIVE  
SUITE 200  
City-State-Zip: PLANO TX 75075

Title MANAGER  
Name MURSKI, MARK  
Address 3820 AMERICAN DRIVE  
SUITE 200  
City-State-Zip: PLANO TX 75075

Title MANAGER  
Name DAY, FRED  
Address 3820 AMERICAN DRIVE  
SUITE 200  
City-State-Zip: PLANO TX 75075

Title MANAGER  
Name KLATZKIN, RALPH  
Address 3820 AMERICAN DRIVE  
SUITE 200  
City-State-Zip: PLANO TX 75075

**Continues on page 2**

*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: ANNE S. CROWE**

**SVP & SECRETARY**

**03/12/2019**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date

**Authorized Person(s) Detail Continued :**

Title           MANAGER  
Name           RASHID, SIKANDER  
Address        3820 AMERICAN DRIVE  
                SUITE 200  
City-State-Zip: PLANO TX 75075