

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 16, 2007 8:00 am
Secretary of State

03-16-2007 90153 034 ****50.00

DOCUMENT # L00000015302

1. Entity Name
ENVIRONMENT CONTROL OF EAST ORLANDO, LLC



Principal Place of Business
**1310 WEST COLONIAL DRIVE, #24
ORLANDO, FL 32804**

Mailing Address
**1310 WEST COLONIAL DRIVE, #24
ORLANDO, FL 32804**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03012007 Chg-LLC CR2E083 (12/06)

4. FEI Number
36-4416472

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MARLETTE, GLEN A
1310 W. COLONIAL DR.
ORLANDO, FL 32810**

Name **David P. Richard**

Street Address (P.O. Box Number is Not Acceptable)

1310 W. Colonial Dr Suite #24

City **Orlando**

FL

Zip Code **32804**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

David P. Richard

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2-28-07

DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
MARLETTE, GLEN A
5509 ELIZABETH ROSE SQUARE, SUITE 24
ORLANDO, FL 32810** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**mgr/owner
Richard, David P
1183 Countrywood Dr.
Apopka FL 32703** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
PAULING, TED
10871 ENGLE RD.
VANDALIA, OH 45377** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
LAMB, JOHN
1001 FOURIER DRIVE
MADISON, WI** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
FOSNOT, STEVE
1001 FOURIER DRIVE
MADISON, WI** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
HANSON, TOM
1001 FOURIER DRIVE
MADISON, WI** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
DAVIS, GARY
4710 K INTERSTATE DR.
CINCINNATI, OH 45246** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.

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SIGNATURE:

David P. Richard

2-28-07

407 422 6411

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #