

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000028537

FILED  
Feb 25, 2009  
Secretary of State

Entity Name: PAT'S PUMP & BLOWER, L.L.C.

**Current Principal Place of Business:**

630 WEST CHURCH STREET  
ORLANDO, FL 32805

**New Principal Place of Business:**

**Current Mailing Address:**

630 WEST CHURCH STREET  
ORLANDO, FL 32805

**New Mailing Address:**

FEI Number: 04-3769717

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

FINKBEINER, FRANK G ESQ.  
108 E. HILLCREST STREET  
ORLANDO, FL 32801 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: MGRM ( ) Delete  
Name: FENDER, KEVIN A  
Address: 1775 DRULINER ROAD  
City-St-Zip: ST. CLOUD, FL 34771

Title: MGRM ( ) Delete  
Name: FENDER, PATRICK A  
Address: 10494 STEVEN DR.  
City-St-Zip: POLK CITY, FL 33868

Title: MGRM ( ) Delete  
Name: LE, MAN T  
Address: 1793 DERBY GLEN DR  
City-St-Zip: ORLANDO, FL 32837

**ADDITIONS/CHANGES:**

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

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 exemption stated in Chapter 119, 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: KEVIN A FENDER

MGRM

02/25/2009

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