

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000046406

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** B. WILLIAMS AIR CONDITIONING, LLC

**Current Principal Place of Business:**

1818 MONTANA AVENUE  
LYNN HAVEN, FL 32444 US

**New Principal Place of Business:**

**Current Mailing Address:**

1818 MONTANA AVENUE  
LYNN HAVEN, FL 32444 US

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

WILLIAMS, WILLIAM M JR  
1818 MONTANA AVENUE  
LYNN HAVEN, FL 32444 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  
Name: WILLIAMS, WILLIAM M JR  
Address: 1818 MONTANA AVENUE  
City-St-Zip: LYNN HAVEN, FL 32444 US

I hereby 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: WILLIAM M WILLIAMS JR

OWNE

04/29/2011

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