

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000049422

FILED
Apr 30, 2007
Secretary of State

Entity Name: ALL-PRO HEATING & COOLING, LLC

Current Principal Place of Business:

9148 BONITA BEACH RD STE. 202
202
BONITA SPRINGS, FL 34135

New Principal Place of Business:

3371 BONITA BEACH RD.
BONITA SPRINGS, FL 34134

Current Mailing Address:

9148 BONITA BEACH RD STE. 202
BONITA SPRINGS, FL 34135

New Mailing Address:

6104 HOLT CT
FT MYERS, FL 33509

FEI Number: 41-2142613

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FORRESTER, DAVID M
9148 BONITA BEACH RD.
202
BONITA SPRINGS, FL 34135 US

Name and Address of New Registered Agent:

FORRESTER, DAVID M
6104 HOLT CT.
FT MYERS, FL 33509 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: DAVID M. FORRESTER

04/30/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FORRESTER, DAVID
Address: 6140 HOLT CT
City-St-Zip: FT. MYERS, FL 33905

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: FORRESTER, DAVID M
Address: 6104 HOLT CT.
City-St-Zip: FT. MYERS, FL 33509

Title: MGRM () Change (X) Addition
Name: PACKARD, BURTON
Address: 3489 QUAILS WALK
City-St-Zip: BONITA SPRINGS, FL 34134

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: DAVID M. FORRESTER

MGRM

04/30/2007

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