

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000056018

FILED
Feb 24, 2005
Secretary of State

Entity Name: DEPENDABLE AIR SUPPLY - JACKSONVILLE, LLC

Current Principal Place of Business:

511 NORTH MASHTA DRIVE
KEY BISCAYNE, FL 33149

New Principal Place of Business:

P.O. BOX 565190
MIAMI, FL 33256

Current Mailing Address:

511 NORTH MASHTA DRIVE
KEY BISCAYNE, FL 33149

New Mailing Address:

P.O. BOX 565190
MIAMI, FL 33256

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CORPORATION COMPANY OF MIAMI
201 SOUTH BISCAYNE BOULEVARD
1500
MIAMI, FL 33131 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/MEMBERS:

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

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: DEPENDABLE AIR SUPPL, Y - JACKSONVIL L E, LLC
Address: P.O. BOX 565190
City-St-Zip: MIAMI, FL 33256

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: H HINCKLEY

MGR

02/24/2005

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