

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000063782

FILED
Apr 21, 2008
Secretary of State

Entity Name: AIR CONDITIONING DOCTOR, LLC

Current Principal Place of Business:

13191 56TH COURT
SUITE # 103
CLEARWATER, FL 33760

New Principal Place of Business:

Current Mailing Address:

13191 56TH COURT
SUITE # 103
CLEARWATER, FL 33760

New Mailing Address:

FEI Number: 90-0194977

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ABBERGER, WILLIAM
13191 56TH COURT
SUITE # 103
CLEARWATER, FL 33760 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: P () Delete
Name: ABBERGER, WILLIAM
Address: 5444 BELLEVIEW AVE
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: P () Delete
Name: LUCKER, JAMES R
Address: 5392 WINHAWK WAY
City-St-Zip: LUTZ, FL 33558

Title: P () Delete
Name: LUCKER, SANDRA
Address: 5372 WINHAWK WAY
City-St-Zip: LUTZ, FL 33558

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: JAMES R. LUCKER

P

04/21/2008

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