

# **2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000068497

**FILED**  
**Aug 28, 2008**  
**Secretary of State**

**Entity Name:** CARL SELLERS AIR CONDITIONING AND HEATING, LLC

**Current Principal Place of Business:**

1245 NE 14TH STREET  
OCALA,, FL 34470 US

**New Principal Place of Business:**

1543 NE 22ND AVE  
UNIT D  
OCALA,, FL 34470 US

**Current Mailing Address:**

1245 NE 14TH STREET  
OCALA, FL 34470 US

**New Mailing Address:**

PO BOX 1660  
SILVER SPRINGS, FL 34489 US

FEI Number: 20-1835881      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

SELLERS, LEMUEL C  
1245 NE 14TH STREET  
OCALA, FL 34470 US

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

SELLERS, LEMUEL C  
1711 SE 190TH AVE  
SILVER SPRINGS, FL 34488 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:

08/28/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: SELLERS, LEMUEL C  
Address: 1245 NE 14TH STREET  
City-St-Zip: OCALA, FL 34470 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: SELLERS, LEMUEL C  
Address: 1711 SE 190TH AVE  
City-St-Zip: SILVER SPRINGS, FL 34488 US

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: LEMUEL CARL SELLERS

MGR

08/28/2008

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