

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 29, 2008 8:00 am
Secretary of State

01-29-2008 90063 019 ***138.75

DOCUMENT # L05000113546

1. Entity Name
POLAR AIR SUPPLY LLC



Principal Place of Business
**6461 GARDEN RD #130
RIVIERA BEACH, FL 33404**

Mailing Address
**6461 GARDEN RD #130
RIVIERA BEACH, FL 33404**

60004592



DO NOT WRITE IN THIS SPACE

01082008No Chg-LLC

CR2E083 (12/07)

4. FEI Number
74-3171683

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**REAGAN, JEFFREY
6461 GARDEN RD #130
RIVIERA BEACH, FL 33404**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	REAGAN, JEFFREY
STREET ADDRESS	6461 GARDEN RD #130
CITY-ST-ZIP	RIVIERA BEACH, FL 33404
TITLE	PRESIDENT
NAME	JONATHAN T. BELL
STREET ADDRESS	6461 GARDEN RD #130
CITY-ST-ZIP	RIVIERA BEACH, FL 33404
TITLE	VICE PRESIDENT
NAME	JEFFREY REAGAN
STREET ADDRESS	6461 GARDEN RD #130
CITY-ST-ZIP	RIVIERA BEACH, FL 33404
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

DATE

Daytime Phone #

J. Bell Jonathan T Bell 1/21/08 561-248-2479