

**2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L06000013912

**FILED**  
**Sep 29, 2009**  
**Secretary of State****Entity Name:** COMPLETE BUILDING MAINTENANCE CO., LLC**Current Principal Place of Business:**2040 NW 40TH CT  
SUITE 3  
POMPANO BEACH, FL 33064**New Principal Place of Business:****Current Mailing Address:**702 WESTERN AVE  
LOMBARD, IL 601462005**New Mailing Address:**702 WESTERN AVE  
LOMBARD, IL 60148**FEI Number:** 03-0580138**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM  
1200 S PINE ISLAND RD  
PLANTATION, FL 33324 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:** MGR ( ) Delete  
**Name:** SMITH, PAUL V  
**Address:** 702 WESTERN AVE  
**City-St-Zip:** LOMBARD, IL 601482005**Title:** P ( ) Delete  
**Name:** KINTZLER, BRUCE W  
**Address:** 2040 NW 40TH COURT #3  
**City-St-Zip:** POMPANO BEACH, FL 33064**ADDITIONS/CHANGES:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** P (X) Change ( ) Addition  
**Name:** HINES, JAMES H  
**Address:** 2040 NW 40TH COURT #3  
**City-St-Zip:** POMPANO BEACH, FL 33064

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: PAUL V SMITH

MGR

09/29/2009

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