2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 23, 2009
Secretary of State

DOCUMENT# L06000040100

Entity Name: AFFORDABLE PLUMBING OF CENTRAL FLORIDA LLC

Current Principal Place of Business:

9269 LARETTE DRIVE
ORLANDO, FL 32817

New Principal Place of Business:

Current Mailing Address:

9269 LARETTE DRIVE
ORLANDO, FL 32817

New Mailing Address:

FEI Number: 50-0025542 **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:

MEAD, VICTOR O
2153 LEE ROAD
WINTER PARK, FL FL 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: SEXTON, RANDALL W
Address: 9269 LARETTE DRIVE
City-St-Zip: ORLANDO, FL 32817

Title: MGRM ( ) Delete
Name: CONNER, JONI
Address: 9269 LARETTE DRIVE
City-St-Zip: ORLANDO, FL 32817

Title: MGRM ( ) Delete
Name: ARNEY, WILLIAM R
Address: 816 MARVIN ROAD
City-St-Zip: ORMOND BEACH, FL 32176

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: RANDALL W. SEXTON MGR 09/23/2009

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