2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000089406 FILED 1. Entity Name MICHEALS AIR CONDITIONING & HEATING LLC Aug 25, 2008 08:00 AM Secretary of State Principal Place of Business Mailing Address 5530 KAUFFMAN ROAD 5530 KAUFFMAN ROAD MILTON, FL 32583 MILTON, FL 32583 08112008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-5524469 Not Applicable \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent MILLER, MICHEAL D DO NOT WRITE 5530 KAUFFMAN ROAD MILTON, FL 32583 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 reinstating) DATE FILE NOW!!! FEE IS \$138.75 In accordance with s. 607.193(2)(b), F.S., the limited Due by September 12, 2008 liability company did not receive the prior notice. 9. MANAGING MEMBERS/MANAGERS TITLE MGR MILLER, MICHEAL D NAME 5530 KAUFFMAN ROAD STREET ADDRESS CITY-ST-ZIP MILTON, FL 32583 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-7P IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

11/08

850 982 -8044

Daytime Phone #