

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000102745

FILED  
Apr 27, 2012  
Secretary of State

**Entity Name:** CHEMICAL SOLUTIONS OF SOUTH FLORIDA LLC

**Current Principal Place of Business:**

17252 ALICO CENTER RD.  
SUITE 1  
FORT MYERS, FL 33967

**New Principal Place of Business:**

17252 ALICO CENTER RD.  
SUITE 4  
FORT MYERS, FL 33967

**Current Mailing Address:**

17252 ALICO CENTER RD.  
SUITE 1  
FORT MYERS, FL 33967

**New Mailing Address:**

17252 ALICO CENTER RD.  
SUITE 4  
FORT MYERS, FL 33967

**FEI Number:** 20-8271066

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BATES, ROY  
17252 ALICO CENTER RD.  
SUITE 1  
FORT MYERS, FL 33967 US

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

BATES, ROY  
17252 ALICO CENTER RD.  
SUITE 4  
FORT MYERS, FL 33967 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:

04/27/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BATES, ROY  
Address: 17252 ALICO CENTER RD. SUITE 4  
City-St-Zip: FORT MYERS, FL 33967

Title: MGRM  
Name: ZAKANY, GLENN  
Address: 17252 ALICO CENTER RD. SUITE 4  
City-St-Zip: FORT MYERS, FL 33967

Title: MGRM  
Name: LUND, WILLIAM T  
Address: 17252 ALICO CENTER RD. SUITE 4  
City-St-Zip: FORT MYERS, FL 33967

I hereby 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: WILLIAM T LUND

MGRM

04/27/2012

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