

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000085069

Entity Name: C.P.S.PLUMBING, LLC

**FILED**  
**Jan 07, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

7636 S. FOUR OAKS DR.  
FLORAL CITY, FL 34436 US

**New Principal Place of Business:**

**Current Mailing Address:**

7636 S. FOUR OAKS DR.  
FLORAL CITY, FL 34436 US

**New Mailing Address:**

FEI Number: 26-0751843

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

YINGLING, MICHAEL  
7636 S FOUR OAKS DR  
FLORAL CITY, FL 34436 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: MGRM  
Name: YINGLING, MICHAEL  
Address: 7636 S. FOUR OAKS DR.  
City-St-Zip: FLORAL CITY, FL 34436 US

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: MICHAEL YINGLING

PRES

01/07/2012

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