

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000118971

FILED  
Apr 23, 2012  
Secretary of State

**Entity Name:** CNM AIR CONDITIONING AND APPLIANCE SERVICE, LLC

**Current Principal Place of Business:**

1301 SW 253RD TERRACE  
NEWBERRY, FL 32669 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1196  
NEWBERRY, FL 32669 US

**New Mailing Address:**

**FEI Number:** 75-3261625

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MAXWELL, CASEY N  
1301 SW 253RD TERRACE  
NEWBERRY, FL 32669 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  
Name: MAXWELL, CASEY N  
Address: 1301 SW 253RD TERRACE  
City-St-Zip: NEWBERRY, FL 32669 US

Title: MGR  
Name: MAXWELL, CASEY N  
Address: PO BOX 1196  
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Address: PO BOX 1196  
City-St-Zip: NEWBERRY, FL 32669

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: CASEY N. MAXWELL

MGR.

04/23/2012

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