

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000039407

FILED
Jan 16, 2009
Secretary of State

Entity Name: FLORIDA VALVE & EQUIPMENT, LLC

Current Principal Place of Business:

9618 SW 45TH AVE
OCALA, FL 34476

New Principal Place of Business:

2501 SW 57TH AVENUE
UNIT 603
OCALA, FL 34474

Current Mailing Address:

PO BOX 773537
OCALA, FL 34477

New Mailing Address:

FEI Number: 26-2400420

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEMPSEY, TIMOTHY
9618 SW 45TH AVE
OCALA, FL 34476 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 () Delete
Name: DEMPSEY, TIMOTHY
Address: 9618 SW 45TH AVE
City-St-Zip: OCALA, FL 34476

Title: MGRM () Delete
Name: MITCHELL, GIRARD
Address: 5507 MONTE FINO COURT
City-St-Zip: LAKE WORTH, FL 33463

ADDITIONS/CHANGES:

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: TIMOTHY E DEMPSEY

MGRM

01/16/2009

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