

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000061497

FILED
Feb 28, 2012
Secretary of State

Entity Name: EXTREME AIR & REFRIGERATION SERVICES, LLC

Current Principal Place of Business:

5524 OVER CREEK DR.
ELKTON, FL 32033

New Principal Place of Business:

403 MARSHALL CIRCLE
ST. AUGUSTINE, FL 32086

Current Mailing Address:

5524 OVER CREEK DR.
ELKTON, FL 32033

New Mailing Address:

403 MARSHALL CIRCLE
ST. AUGUSTINE, FL 32086

FEI Number: 26-2865989

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBY, CHRISTOPHER S
5920 JOHN PITTS ROAD
PANAMA CITY, FL 32404 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: ROBY, CHRISTOPHER S
Address: 5920 JOHN PITTS ROAD
City-St-Zip: PANAMA CITY, FL 32404

Title: MGRM
Name: STONE, WILLIAM M
Address: 5524 OVER CREEK DRIVE
City-St-Zip: ELKTON, FL 32033

Title: MGRM
Name: ROBY, JANICE N
Address: 5920 JOHN PITTS ROAD
City-St-Zip: PANAMA CITY, FL 32404

Title: MGRM
Name: STONE, JENNIFER L
Address: 5524 OVER CREEK DRIVE
City-St-Zip: ELKTON, FL 32033

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 STONE

MGRM

02/28/2012

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