

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000113416

Entity Name: A&E COMPLETE, LLC

**FILED**  
**Apr 06, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

177 WADING BIRD CIRCLE  
PALM BAY, FL 32908

**New Principal Place of Business:**

**Current Mailing Address:**

177 WADING BIRD CIRCLE  
PALM BAY, FL 32908

**New Mailing Address:**

FEI Number: 26-3864752

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

MONTANEZ, EDGARDO MGRM  
177 WADING BIRD CIRCLE  
PALM BAY, FL 32908 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: MONTANEZ, EDGARDO  
Address: 177 WADING BIRD CIRCLE  
City-St-Zip: PALM BAY, FL 32908

Title: MGRM  
Name: BADER, ANDREW J  
Address: 3370 LAKEVIEW CIRCLE  
City-St-Zip: MELBOURNE, FL 32934

Title: MGRM  
Name: MONTANEZ, TERRI L  
Address: 177 WADING BIRD CIRCLE  
City-St-Zip: PALM BAY, FL 32908

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: EDGARDO MONTANEZ

MGRM

04/06/2011

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