

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000072425

FILED
Apr 27, 2012
Secretary of State

Entity Name: ALL FLORIDA EXHAUST PRO'S LLC

Current Principal Place of Business:

859 NONASTONE RUN
CASSELBERRY, FL 32707 US

New Principal Place of Business:

16449 CR 455
MONTVERDE, FL 34756 US

Current Mailing Address:

859 NONASTONE RUN
CASSELBERRY, FL 32707 US

New Mailing Address:

FEI Number: 27-0702695 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MILBURN, JAMES R JR.
17541 LONGRIDGE DRIVE
MONTVERDE, FL 34756 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: MILBURN, JAMES R JR
Address: 17541 LONGRIDGE DRIVE
City-St-Zip: MONTVERDE, FL 34756 US

Title: MGRM
Name: MILBURN, MICHELLE R
Address: 17541 LONGRIDGE DRIVE
City-St-Zip: MONTVERDE, FL 34756 US

Title: MGRM
Name: BROSSIA, CHAD M
Address: 859 NONASTONE RUN
City-St-Zip: CASSELBERRY, FL 32707 US

Title: MGRM
Name: BROSSIA, KIM L
Address: 859 NONASTONE RUN
City-St-Zip: CASSELBERRY, FL 32707 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: MICHELLE MILBURN

MGRM

04/27/2012

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