

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000001753

FILED
Jul 21, 2008
Secretary of State

Entity Name: AWHR AMERICA'S WATER HEATER RENTALS, L.L.C.

Current Principal Place of Business:

101 SOUTH HANLEY ROAD, STE. 1910
ST. LOUIS, MO 63105

New Principal Place of Business:

1215 FERN RIDGE PARKWAY
216
ST. LOUIS, MO 63141

Current Mailing Address:

101 SOUTH HANLEY ROAD, STE. 1910
ST. LOUIS, MO 63105

New Mailing Address:

1215 FERN RIDGE PARKWAY
216
ST. LOUIS, MO 63141

FEI Number: 32-0043900 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

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:

ADDITIONS/CHANGES:

Title: MGR () Delete
Name: MELNUK, PAUL
Address: 101 SOUTH HANLEY ROAD, STE. 1910
City-St-Zip: ST. LOUIS, MO 63105

Title: MGR (X) Change () Addition
Name: MAQARIE WATER HEATER, RENTALS LLC
Address: 125 WEST 55TH STREET
City-St-Zip: NEW YORK, NY 10019

Title: MGR (X) Delete
Name: HILLMAN, THOMAS
Address: 101 SOUTH HANLEY ROAD, STE. 1910
City-St-Zip: ST. LOUIS, MO 63105

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Delete
Name: ROBERTS, DAVID
Address: 245 PARK AVENUE, 26TH FLOOR
City-St-Zip: NEW YORK, NY 10167

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Delete
Name: BRIAN, JOSHUA
Address: 245 PARK AVENUE, 26TH FLOOR
City-St-Zip: NEW YORK, NY 10167

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Delete
Name: SCHWARTZ, JOEL
Address: 245 PARK AVENUE, 26TH FLOOR
City-St-Zip: NEW YORK, NY 10167

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: CARL DOYLE

MR.

07/21/2008

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