

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M08000001704

**FILED**  
**Jun 07, 2010**  
**Secretary of State**

**Entity Name:** COMFORT SYSTEMS USA NATIONAL ACCOUNTS, LLC

**Current Principal Place of Business:**

2655 FORTUNE CIRCLE WEST, STE. E-F  
INDIANAPOLIS, IN 46241

**New Principal Place of Business:**

**Current Mailing Address:**

2655 FORTUNE CIRCLE WEST, STE. E-F  
INDIANAPOLIS, IN 46241

**New Mailing Address:**

**FEI Number:** 74-2886504

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: MGR  
Name: ACCU-TEMP GP, INC.  
Address: 675 BERING DR. SUITE 400  
City-St-Zip: HOUSTON, TX 77057

Title: MGR  
Name: ACCU-TEMP LP, INC.  
Address: 675 BERING DR. SUITE 400  
City-St-Zip: HOUSTON, TX 77057

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: TRENT MCKENNA FOR ACCU-TEMP

VP

06/07/2010

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