

**2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M19000010792

**Entity Name:** INDUSTRIAL COMPRESSOR SUPPLIES LLC

**Current Principal Place of Business:**

316 FEE FEE ROAD  
MARYLAND HEIGHTS, MO 63043

**Current Mailing Address:**

1555 DETRICK AVE  
DELAND, FL 32724 US

**FEI Number:** 77-0670318

**Certificate of Status Desired:** No

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

BOWMAN, KEITH  
1555 DETRICK AVE  
DELAND, FL 32724 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

**Authorized Person(s) Detail :**

Title MGR  
Name BOWMAN, KEITH  
Address 316 FEE FEE ROAD  
City-State-Zip: MARYLAND HEIGHTS MO 63043

Title MEM  
Name BOWMAN, KEITH  
Address 316 FEE FEE ROAD  
City-State-Zip: MARYLAND HEIGHTS MO 63043

Title AP  
Name BOWMAN, KEITH  
Address 316 FEE FEE ROAD  
City-State-Zip: MARYLAND HEIGHTS MO 63043

Title AP  
Name BOWMAN, KYLE  
Address 316 FEE FEE ROAD  
City-State-Zip: MARYLAND HEIGHTS MO 63043

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** KEITH BOWMAN

**OWNER**

**02/06/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date