

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000085311

**FILED**  
**Apr 12, 2011**  
**Secretary of State**

**Entity Name:** UF MOBLE HOME SERVICES, LLC

**Current Principal Place of Business:**

225 CAPITAL STREET  
BRONSON, FL 32621

**New Principal Place of Business:**

**Current Mailing Address:**

225 CAPITAL STREET  
BRONSON, FL 32621

**New Mailing Address:**

**FEI Number:** 41-2140235

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FEAGLE, RODNEY  
225 CAPITAL STREET  
BRONSON, FL 32621 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: FEAGLE, RODNEY  
Address: 225 CAPITAL STREET  
City-St-Zip: BRONSON, FL 32621

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: RODNEY FEAGLE

MGR

04/12/2011

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