

# **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000081324

**FILED**  
**Apr 14, 2007**  
**Secretary of State**

**Entity Name:** CORNERSTONE TAX SERVICE LLC

**Current Principal Place of Business:**

8017 SHADDOCK PLACE  
LAND O LAKES, FL 346377429

**New Principal Place of Business:**

7114 MELOGOLD CIRCLE  
LAND O LAKES, FL 346377429

**Current Mailing Address:**

8017 SHADDOCK PLACE  
LAND O LAKES, FL 346377429

**New Mailing Address:**

7114 MELOGOLD CIRCLE  
LAND O LAKES, FL 346377429

**FEI Number:** 75-3199120

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MIKEL, JAMES W  
8017 SHADDOCK PLACE  
LAND O LAKES, FL 346377429 US

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

MIKEL, JAMES W  
7114 MELOGOLD CIRCLE  
LAND O LAKES, FL 346377429 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:

04/14/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: MIKEL, MARILYN B  
Address: 8017 SHADDOCK PLACE  
City-St-Zip: LAND O LAKES, FL 346377429

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: MIKEL, MARILYN B  
Address: 7114 MELOGOLD CIRCLE  
City-St-Zip: LAND O LAKES, FL 346377429

I hereby certify that the information supplied with this filing does not qualify for the 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: MARILYN B MIKEL

MGRM

04/14/2007

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