

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000101853

FILED
Apr 08, 2011
Secretary of State

Entity Name: SPECIALTY MANAGEMENT SERVICES, LLC

Current Principal Place of Business:

12670 CREEKSIDE LANE
FT. MYERS, FL 33919

New Principal Place of Business:

Current Mailing Address:

12670 CREEKSIDE LANE
FT. MYERS, FL 33919

New Mailing Address:

12670 CREEKSIDE LANE
FORT MYERS, FL 33919

FEI Number: 27-3635028

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEHALIK, JOHN
12670 CREEKSIDE LANE
FT. MYERS, FL 33919 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: MGRM
Name: MEHALIK, JOHN
Address: 12670 CREEKISDE LANE SUITE 202
City-St-Zip: FORT MYERS, FL 33919

Title: MGRM
Name: HUMBERT, EDWARD
Address: 12841 TERABELLA WAY
City-St-Zip: FORT MYERS, FL 33912

Title: MGRM
Name: SPRINGER, CHARLES
Address: 2531 CLEVELAND AVE SUITE #1
City-St-Zip: FORT MYERS, FL 33901

Title: MGRM
Name: CURCIONE, PETER
Address: 11970 ROSEMOUNT DR.
City-St-Zip: FORT MYERS, FL 33913

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: JOHN MEHALIK

MGRM

04/08/2011

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