

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000133747

**FILED**  
**Apr 27, 2012**  
**Secretary of State**

**Entity Name:** A & B SERVICES OF NORTH FLORIDA, LLC

**Current Principal Place of Business:**

139 HORSESHOE DRIVE  
HAVANA, FL 32333

**New Principal Place of Business:**

**Current Mailing Address:**

139 HORSESHOE DRIVE  
HAVANA, FL 32333

**New Mailing Address:**

FEI Number: 45-3962341

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BELL, STACY D  
139 HORSESHOE DRIVE  
HAVANA, FL 32333 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: ANDREWS, WILLIAM W  
Address: 139 HORSESHOE DRIVE  
City-St-Zip: HAVANA, FL 32333

Title: MGRM  
Name: BELL, STACY D  
Address: 139 HORSESHOE DRIVE  
City-St-Zip: HAVANA, FL 32333

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: STACY BELL

MGRM

04/27/2012

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