

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M10000003324

**FILED**  
**Jan 23, 2011**  
**Secretary of State**

**Entity Name:** ALCOHOL & DRUG TESTING SERVICES, LLC

**Current Principal Place of Business:**

2700 E. SUNSET ROAD, A-7  
LAS VEGAS, NV 89120

**New Principal Place of Business:**

**Current Mailing Address:**

2700 E. SUNSET ROAD, A-7  
LAS VEGAS, NV 89120

**New Mailing Address:**

445-A S. LAWRENCE BLVD  
KEYSTONE HEIGHTS, FL 32656

**FEI Number:** 88-0472556

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BELFORD, NORMAN S  
4756 SE 6TH LANE  
KEYSTONE HEIGHTS, FL 32656 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: STEPHENS, JANA R  
Address: 231 SPRINGBROOK DRIVE  
City-St-Zip: HOT SPRINGS, AR 71913

Title: MGR  
Name: BELFORD, NORMAN S  
Address: 4756 SE 6TH LANE  
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: MGR  
Name: THOEN, JULIE A  
Address: 1839 RUBY LANE  
City-St-Zip: HENDERSON, NV 89104

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: NORMAN S. BELFORD

CFO

01/23/2011

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