

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000023730

Entity Name: AVCON SERVICES LLC

FILED  
Jan 05, 2011  
Secretary of State

**Current Principal Place of Business:**

% MICHAEL E. GOODBREAD, JR.  
50 NORTH LAURA STREET, SUITE 2800  
JACKSONVILLE, FL 32202

**New Principal Place of Business:**

**Current Mailing Address:**

% MICHAEL E. GOODBREAD, JR.  
50 NORTH LAURA STREET, SUITE 2800  
JACKSONVILLE, FL 32202

**New Mailing Address:**

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired ( )

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

FOWLER WHITE BOGGS P.A.  
ATTN: MICHAEL E. GOODBREAD, JR.  
50 NORTH LAURA STREET, SUITE 2800  
JACKSONVILLE, FL 32202 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: GOODBREAD, MICHAEL E MGR  
Address: 50 NORTH LAURA STREET, SUITE 2800  
City-St-Zip: JACKSONVILLE, FL 32202

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: MICHAEL E. GOODBREAD, JR.                      MGR                      01/05/2011

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