

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000003090

**Entity Name:** 1ST CHOICE MAINTENANCE PROS, LLC

**Current Principal Place of Business:**

4012 EDGELAND TRAIL  
MIDDLEBURG, FL 32068

**Current Mailing Address:**

PO BOX 888  
MIDDLEBURG, FL 32050

**FEI Number:** 54-2164898

**Certificate of Status Desired:** Yes

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

DAVIS, SHERILYN K  
4012 EDGELAND TRAIL  
MIDDLEBURG, FL 32068 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name DAVIS, CHRISTOPHER D  
Address PO BOX 888  
City-State-Zip: MIDDLEBURG FL 32050

Title MGR  
Name DAVIS, SHERILYN K  
Address PO BOX 888  
City-State-Zip: MIDDLEBURG FL 32050

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** SHERILYN K. DAVIS

**MANAGER**

**04/13/2014**

Electronic Signature of Signing Authorized Person(s) Detail

Date