

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000050660

**Entity Name:** SERVICE PROFESSIONALS LLC

**Current Principal Place of Business:**

2245 CORK OAK STREET W  
SARASOTA, FL 34232

**Current Mailing Address:**

P.O. BOX 22102  
SARASOTA, FL 34276

**FEI Number:** 06-1747759

**Certificate of Status Desired:** No

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

HOUGHTON, WILLIAM M  
2245 CORK OAK STREET W  
SARASOTA, FL 34232 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 MGRM  
Name HOUGHTON, WILLIAM M  
Address 2245 CORK OAK STREET W  
City-State-Zip: SARASOTA FL 34232

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** WILLIAM M HOUGHTON

MGRM

03/03/2013

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date