

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000072243

Entity Name: PRS SERVICES, LLC

Current Principal Place of Business:

% SHARON C BRANNAN CPA PA
161 N MAIN ST
WILLISTON, FL 32696

Current Mailing Address:

P O BOX 140213
GAINESVILLE, FL 32614 US

FEI Number: 20-3187007

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHARON C BRANNAN CPA PA
161 N MAIN STREET
WILLISTON, FL 32696 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 SHOE, PAUL R
Address P O BOX 359
City-State-Zip: GAINESVILLE FL 32602

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: PAUL R SHOE

MGRM

04/28/2014

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date