

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000045764

**Entity Name:** CADRE PROFESSIONAL SERVICES GROUP LLC

**Current Principal Place of Business:**

1423 E. HILLSBORO BLVD.  
618  
DEERFIELD BEACH, FL 33441

**Current Mailing Address:**

2660 MILITARY STREET  
PORT HURON, MI 48060 US

**FEI Number:** 27-3245610

**Certificate of Status Desired:** Yes

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

STUDAKER, PAULA B  
1423 E. HILLSBORO BLVD.  
618  
DEERFIELD BEACH, FL 33441 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 STUDAKER, PAULA B  
Address 1423 E. HILLSBORO BLVD #618  
City-State-Zip: DEERFIELD BEACH FL 33441

*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:** PAULA B STUDAKER

MGRM

04/01/2013

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

\_\_\_\_\_ Date