

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000096109

**Entity Name:** ACTION FIELD SERVICES LLC

**Current Principal Place of Business:**

5564 MONTE CARLO LANE  
MARGATE, FL 33068

**Current Mailing Address:**

5564 MONTE CARLO LANE  
MARGATE, FL 33068 US

**FEI Number:** 46-3145765

**Certificate of Status Desired:** No

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

LEWIS, SHARON N  
5564 MONTE CARLO LANE  
MARGATE, FL 33068 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:** SHARON N LEWIS

05/01/2014

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name LEWIS, GREGORY D  
Address 5564 MONTE CARLO LANE  
City-State-Zip: MARGATE FL 33068

Title MGR  
Name LEWIS, SHARON N  
Address 5564 MONTE CARLO LANE  
City-State-Zip: MARGATE FL 33068

*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:** SHARON N LEWIS

MGR

05/01/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date