

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L00000003283

Entity Name: OPS, L.L.C.

**FILED**  
**Jan 06, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

200 N. BETTY LANE  
APT # 3D  
CLEARWATER, FL 33755

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1661  
CLEARWATER, FL 33757

**New Mailing Address:**

FEI Number: 59-3685658

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CALLAHAN, GUY MR.  
200 N. BETTY LANE  
APT # 4D  
CLEARWATER, FL 33755 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BARRON, RICHARD B  
Address: 200 N. BETTY LANE, APT # 3D  
City-St-Zip: CLEARWATER, FL 33755

I hereby certify that the information indicated on this 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.

SIGNATURE: RICHARD BARRON

MGRM

01/06/2010

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date