## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L00000015294

Entity Name: SERVICE ACE, L.L.C.

FILED Mar 26, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1606 NW 10TH ST OCALA, FL 34475

Current Mailing Address: New Mailing Address:

1606 NW 10TH ST OCALA, FL 34475

FEI Number: 59-3686143 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

WORTHINGTON, LINDA L
5050 NW 110TH AVENUE
OCALA, FL 34482 US
WORTHINGTON, LINDA L
8490 NW 118TH TERRACE
OCALA, FL 34482 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: 03/26/2007

Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WORTHINGTON, FRED G
Address: 5050 NW 110TH AVENUE

City-St-Zip: OCALA, FL 34482

Title: MGRM ( ) Delete

Name: WORTHINGTON, THOMAS E Address: 3325 SW 97TH CT City-St-Zip: OCALA, FL 34481

Title: MGRM ( ) Delete Name: LEHMAN, J. SCOTT

Address: 10440 SW 54TH CT City-St-Zip: OCALA, FL 34476

Title: MGRM () Delete
Name: WORTHINGTON, LINDA L

Address: 5050 NW 110TH AVE. City-St-Zip: OCALA, FL 34482

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition Name: WORTHINGTON, FRED G

Name: WORTHINGTON, FRED G Address: 8490 NW 118TH TERRACE

City-St-Zip: OCALA, FL 34482

Title: ( ) Change ( ) Addition

Name: Address: City-St-Zip:

Title: ( ) Change ( ) Addition

Name: Address: City-St-Zip:

Title: MGRM (X) Change ( ) Addition

Name: WORTHINGTON, LINDA L Address: 8490 NW 118TH TERRACE

City-St-Zip: OCALA, FL 34482

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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: J. SCOTT LEHMAN MGRM 03/26/2007