

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L00000015294

**FILED**  
**Jan 05, 2010**  
**Secretary of State**

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

**Current Principal Place of Business:**

1606 NW 10TH ST  
OCALA, FL 34475

**New Principal Place of Business:**

**Current Mailing Address:**

1606 NW 10TH ST  
OCALA, FL 34475

**New Mailing Address:**

**FEI Number:** 59-3686143

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WORTHINGTON, LINDA L  
8490 NW 118TH TERRACE  
OCALA, FL 34482 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:** WORTHINGTON, FRED G  
**Address:** 8490 NW 118TH TERRACE  
**City-St-Zip:** Ocala, FL 34482

**Title:** MGRM  
**Name:** WORTHINGTON, THOMAS E  
**Address:** 3325 SW 97TH CT  
**City-St-Zip:** Ocala, FL 34481

**Title:** MGRM  
**Name:** LEHMAN, J. SCOTT  
**Address:** 10440 SW 54TH CT  
**City-St-Zip:** Ocala, FL 34476

**Title:** MGRM  
**Name:** WORTHINGTON, LINDA L  
**Address:** 8490 NW 118TH TERRACE  
**City-St-Zip:** Ocala, FL 34482

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:** J. SCOTT LEHMAN

MM

01/05/2010

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