

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000012469

**FILED**  
**Apr 09, 2010**  
**Secretary of State**

**Entity Name:** Z S ACCOUNTING AND TAX SERVICES, LLC.

**Current Principal Place of Business:**

2522 SW 27TH AVENUE  
OCALA, FL 34471

**New Principal Place of Business:**

**Current Mailing Address:**

2522 SW 27TH AVENUE  
OCALA, FL 34471

**New Mailing Address:**

**FEI Number:** 59-3728476

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SWANSON, VIVIEN L  
2522 SW 27TH AVENUE  
OCALA, FL 34471 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:** ZYGARLOWSKI, ELIZABETH A  
**Address:** 3874 NORTH CALUSA PT  
**City-St-Zip:** CRYSTAL RIVER, FL 34428

**Title:** MGRM  
**Name:** SWANSON, VIVIEN L  
**Address:** 21435 NW 75TH AVE RD  
**City-St-Zip:** MICANOPY, FL 32671

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:** ELIZABETH A. ZYGARLOWSKI

MBR

04/09/2010

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