

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000010262

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

**Entity Name:** CREDIT UNION SERVICES, LLC

**Current Principal Place of Business:**

711 E. HENDERSON AVENUE  
TAMPA, FL 33602

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 172599  
TAMPA, FL 33672

**New Mailing Address:**

**FEI Number:** 01-0676994

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HELBER, RICHARD  
711 E. HENDERSON AVENUE  
TAMPA, FL 33602 US

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

THOMPSON, ROLFE  
711 E. HENDERSON AVENUE  
TAMPA, FL 33602 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: ROLFE THOMPSON

02/05/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: THOMPSON, VICKIE  
Address: 1215 SCOTTSLAND DRIVE  
City-St-Zip: LAKE LAND, FL 33813

Title: MGR  
Name: THOMPSON, ROLFE  
Address: 810 SOUTH BOULEVARD  
City-St-Zip: TAMPA, FL 33606

Title: MGRM  
Name: BRAD, HINES  
Address: 5885 27TH STREET SOUTH  
City-St-Zip: ST. PETERSBURG, FL 33712

Title: MGRM  
Name: BEAUCHAMP, CHARLIE  
Address: 12710 CALLIE JANE LANE  
City-St-Zip: DOVER, FL 33527

Title: MGRM  
Name: BASS, ROSE-MARIE  
Address: 15904 TREVOSE LANE  
City-St-Zip: ODESSA, FL 33556

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: ROLFE THOMPSON

MGR

02/05/2010

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