

# **2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000020496

**FILED**  
**Apr 30, 2004**  
**Secretary of State**

**Entity Name:** FLORIDA AGENT SERVICES, LLC

**Current Principal Place of Business:**

92 SADBERRY ROAD  
QUINCY, FL 32351

**New Principal Place of Business:**

**Current Mailing Address:**

92 SADBERRY ROAD  
QUINCY, FL 32351

**New Mailing Address:**

**FEI Number:** 13-4128279

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

A1A REGISTERED AGENT INC  
92 SADBERRY ROAD  
QUINCY, FL 323510000 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/MEMBERS:**

Title: MGRM ( ) Delete  
Name: FLORIDA AGENT SERVIC, ES, INC.  
Address: 1221 BRICKELL AVE 9TH FLR  
City-St-Zip: MIAMI, FL 33131

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: FLORIDA AGENT SERVIC, ES, INC.  
Address: 92 SADBERRY RD.  
City-St-Zip: QUINCY, FL 32351

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PAUL SMITH

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04/30/2004

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