

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000021204

FILED
Feb 24, 2009
Secretary of State

Entity Name: SPECIALIZED PERSONNEL LOCATORS, LLC

Current Principal Place of Business:

2247 YORVILLE CT
OCOE, FL 34761

New Principal Place of Business:

Current Mailing Address:

2247 YORVILLE CT
OCOE, FL 34761

New Mailing Address:

FEI Number: 41-2065465

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMSEN, KENDALL
2247 YORVILLE CT
OCOE, FL 34761 US

Name and Address of New Registered Agent:

THOMSEN, KENDALL S
2247 YORVILLE CT
OCOE, FL 34761 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: KENDALL THOMSEN

02/24/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: THOMSEN, KENDALL
Address: 2247 YORVILLE CT
City-St-Zip: OCOE, FL 34761

Title: MGR () Delete
Name: WILSON, KEITH
Address: 336 FOREST ST
City-St-Zip: WINDERMERE, FL 34786

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: THOMSEN, KENDALL S
Address: 2247 YORVILLE CT
City-St-Zip: OCOE, FL 34761

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: KENDALL THOMSEN

MGRM

02/24/2009

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