

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000030240

Entity Name: EMS ENTERPRISES, LLC

**FILED**  
**Jan 08, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

9214 PINE ISLAND COURT  
TAMPA, FL 33647

**New Principal Place of Business:**

**Current Mailing Address:**

9214 PINE ISLAND COURT  
TAMPA, FL 33647

**New Mailing Address:**

FEI Number: 75-3088579

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NORMAN, CHRISTOPHER H ESQ.  
C/O HINES, NORMAN, HINES & SULLIVAN, P.L.  
315 SOUTH HYDE PARK AVENUE  
TAMPA, FL 33606 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: MGR  
Name: RATTES, MAX F  
Address: 9214 PINE ISLAND COURT  
City-St-Zip: TAMPA, FL 33647

Title: MGR  
Name: RATTES, DORA B RATTES  
Address: 9214 PINE ISLAND COURT  
City-St-Zip: TAMPA, FL 33647

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: DORA B RATTES

MGR

01/08/2010

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