

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90080 027 ****55.00

DOCUMENT # L03000000816



1. Entity Name
SERVICE ZONE, LLC

Principal Place of Business
400 NORTH TAMPA STREET
SUITE 2300
TAMPA, FL 33602

Mailing Address
400 NORTH TAMPA STREET
SUITE 2300
TAMPA, FL 33602



2. Principal Place of Business
1152 SW Business Pointe Dr

3. Mailing Address
3102 West End
Suite, Apt. #, etc.
#900

04082004 Chg-LLC CR2E083 (10/03)

City & State
Lake City FL
Zip
32025
Country
US

City & State
Nashville TN
Zip
37203
Country
US

4. FEI Number Applied For
☒ Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
GOODWIN, JAMES W ESQ.
400 NORTH TAMPA STREET
SUITE 2300
TAMPA, FL 33602

7. Name and Address of New Registered Agent
Name CT Corporation System
Street Address (P.O. Box Number is Not Acceptable)
1200 S. Pine Island Road
City Plantation FL Zip Code 33324

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Curt Kreisel Asst. Secretary
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

4-27-04

DATE

Filing Fee is \$50.00
Due by May 1, 2004

Make check payable to
Florida Department of State

9. MANAGING MEMBERS / MANAGERS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete

10. ADDITIONS / CHANGES

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
D/P/CEO	David E. Garner	3102 WEST END AVE #900	NASHVILLE TN 37203		
D/V	Paul R. Stone	3102 WEST END AVE #900	Nashville TN 37203		
	Chad Carlson	3102 West End Ave #900	Nashville TN 37203		
	Craig Jantz	3102 West End Ave #900	Nashville TN 37203		
	Terrence Leve Sr	3102 West End Ave #900	Nashville TN 37203		

11. I hereby certify that the information supplied with this filing does not qualify 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 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: Craig Jantz
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

4/24/04

Date

Daytime Phone #