

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000042482

FILED  
Apr 26, 2004  
Secretary of State

Entity Name: TAZ SERVICES, LLC

**Current Principal Place of Business:**

992 ST. CROIX AVENUE  
APOPKA, FL 32703

**New Principal Place of Business:**

380 SEMORAN COMMERCE PLACE  
SUITE 101  
APOPKA, FL 32703

**Current Mailing Address:**

992 ST. CROIX AVENUE  
APOPKA, FL 32703

**New Mailing Address:**

FEI Number: 52-2405829

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ZIEGENBEIN, MICHELLE R  
992 ST. CROIX AVENUE  
APOPKA, FL 32703

**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: ZIEGENBEIN, MICHELLE R  
Address: 992 ST. CROIX AVENUE  
City-St-Zip: APOPKA, FL 32703

Title: MGRM ( ) Delete  
Name: TAYLOR, PAULA M  
Address: 250 BROADMOOR  
City-St-Zip: LAKE MARY, FL 32746

**ADDITIONS/CHANGES:**

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

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

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: MICHELLE R. ZIEGENBEIN

MS.

04/26/2004

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