2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000048940 1. Entity Name BOB'S SERVICES, LLC

Principal Place of Business

1427 WILLINGHAM ROAD CHULUOTA, FL 32766

Mailing Address

1427 WILLINGHAM ROAD CHULUOTA, FL 32766

FILED Jan 17, 2008 08:00 AM Secretary of State



01082008 No Chg-LLC

CR2E083 (12/07)

| 4. | FEI Number |
|----|------------|
| | 20-0473736 |

Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

| 6. | Name | and Address | of Current | Registered | Agent |
|----|------|-------------|------------|------------|-------|
| | | | | | |

MASSEY, BOBBY C 1427 WILLINGHAM ROAD CHULUOTA, FL 32766

DO NOT WRITE IN THIS SPACE

| 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 Florid | a I am familiar with, and ac | cept |
|---------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|------|
| the obligations of registered agent. | • | |

SIGNATURE.

Signature, typed or printed name of registered agent and tritle if applicable

(NOTE: Registered Agent signature required when reinstating

DATE

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

000000788020 01/18/03-80023-011 138.75

| 9. | MANAGING MEMBERS/MANAGERS |
|---------------------------------------|-------------------------------------------------------------------------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR MASSEY, BOBBY C 1427 WILLINGHAM ROAD CHULUOTA, FL 32766 |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| 44 Lhoroby | portion that the information complied with this filling does not good for the |

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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

pm e mayor

1-15-08

Date

Daytime Phone #