

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000052023

FILED
Jul 24, 2007
Secretary of State

Entity Name: DARRELL PORTER SERVICES LLC

Current Principal Place of Business:

13619 HATCHINEHA RD
HAINES CITY, FL 33844

New Principal Place of Business:

Current Mailing Address:

13619 HATCHINEHA RD
HAINES CITY, FL 33844

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

PORTER, DARRELL
13619 HATCHINEHA RD
HAINES CITY, FL 33844 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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PORTER, DARRELL
Address: 13619 HATCHINEHA RD
City-St-Zip: HAINES CITY, FL 323844

ADDITIONS/CHANGES:

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: DARRELL PORTER

MGRM

07/24/2007

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