

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 30, 2008 8:00 am
Secretary of State

05-30-2008 90019 020 ***138.75

DOCUMENT # L04000024806

1. Entity Name
ON TIME PROCESS SERVICE, LLC



Principal Place of Business
**4747 SOUTHEAST 24TH STREET
 OCALA, FL 34471**

Mailing Address
**4747 SOUTHEAST 24TH STREET
 OCALA, FL 34471**

50006481



05032008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 72-1580989	Applied For Not Applicable
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5. Certificate of Status Desired **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

**LINDSEY, VANESSA H
 4747 SOUTHEAST 24TH STREET
 OCALA, FL 34471**

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

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

**FILE NOW!!! FEE IS \$138.75
 Due by September 12, 2008**

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEA CHAMPION, CHARLES J JR 10 PINE COURSE WAY 4747 SE 24th ST OCALA, FL 34472
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Vanessa H. Lindsey 4747 SE 24th ST Ocala FL 34471
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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**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: *Vanessa H. Lindsey* **Vanessa H. Lindsey** **5/1/08** **352-624-1170**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #