2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000026710

Entity Name: Q4 SERVICES, LLC

Name:

Address:

City-St-Zip:

1410 N. GOLDENROD ROAD, SUITE 1

ORLANDO, FL 32807

FILED Mar 02, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1410 N. GOLDENROD ROAD 1410 N. GOLDENROD ROAD SUITE 1 SUITE 7 ORLANDO, FL 32807 ORLANDO, FL 32807 **Current Mailing Address: New Mailing Address:** 1410 N. GOLDENROD ROAD SUITE 1 ORLANDO, FL 32807 FEI Number: 20-0978033 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PONDER, MONICA M 2704 WINDSORGATE LANE ORLANDO, FL 32828 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: ADDITIONS/CHANGES: **PRES** Title: () Change () Addition () Delete PONDER, MONICA M Name: Name: Address: 1410 N. GOLDENROD ROAD, SUITE 1 Address: City-St-Zip: ORLANDO, FL 32807 City-St-Zip: Title: () Delete Title: () Change () Addition Name: ROLLS, JULIE A Name: Address: 1410 N. GOLDENROD ROAD, SUITE 1 Address: City-St-Zip: ORLANDO, FL 32807 City-St-Zip: Title: () Delete Title: () Change () Addition PONDER, MICHAEL L Name: Name: 1410 N. GOLDENROD ROAD, SUITE 1 Address: Address: City-St-Zip: ORLANDO, FL 32807 City-St-Zip: Title: VΡ () Delete Title: () Change () Addition ROLLS, MARTYN

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.

Name:

Address:

City-St-Zip:

SIGNATURE: MONICA PONDER **PRES** 03/02/2009