

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000046773

Entity Name: BOLEYN SERVICES, LLC

**FILED**  
**Mar 14, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

11885 SW 9TH MANOR  
DAVIE, FL 33325 US

**New Principal Place of Business:**

**Current Mailing Address:**

11885 SW 9TH MANOR  
DAVIE, FL 33325 US

**New Mailing Address:**

11885 SW 9TH MANOR  
DAVIE, FL 33325 38

FEI Number: 20-1310926

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

BOLEYN, ROBERT H PRES  
11885 SW 9TH MANOR  
DAVIE, FL 33325 US

**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/MANAGERS:**

Title: PRES  
Name: BOLEYN, ROBERT H PRES  
Address: 11885 SW 9TH MANOR  
City-St-Zip: DAVIE, FL 33325 US

I hereby 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: ROBERT H. BOLEYN

PRES

03/14/2011

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