

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000003090

**FILED**  
**Mar 09, 2012**  
**Secretary of State**

**Entity Name:** 1ST CHOICE CLEANING SUPPLIES, EQUIPMENT & REPAIR LLC

**Current Principal Place of Business:**

165 INDUSTRIAL LOOP SOUTH  
SUITE 3  
ORANGE PARK, FL 32073 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 888  
MIDDLEBURG, FL 32050

**New Mailing Address:**

**FEI Number:** 54-2164898

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

DAVIS, SHERILYN K  
165 INDUSTRIAL LOOP SOUTH  
SUITE 3  
ORANGE PARK, FL 32073 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:** MGRM  
**Name:** DAVIS, CHRISTOPHER D  
**Address:** 165 INDUSTRIAL LOOP SOUTH, SUITE 3  
**City-St-Zip:** ORANGE PARK, FL 32073

**Title:** MGRM  
**Name:** DAVIS, SHERILYN K  
**Address:** 165 INDUSTRIAL LOOP SOUTH, SUITE 3  
**City-St-Zip:** ORANGE PARK, FL 32073

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:** SHERILYN K. DAVIS

MGRM

03/09/2012

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