## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**DOCUMENT # L05000027279** 

1. Entity Name

ST. MARIA'S ACCOUNTING SERVICES, LLC



FILED Apr 09, 2008 08:00 A Secretary of State

Principal Place of Business

118 CALOOSA DRIVE BABSON PARK, FL 33827 Mailing Address

118 CALOOSA DRIVE BABSON PARK, FL 33827



03202008 No Chg-LLC

CR2E083 (12/07)

Daylime Phone #

| 4. FEI Number                    | • |        | Applied For    |
|----------------------------------|---|--------|----------------|
| 20-2558481                       |   |        | Not Applicable |
| 5. Certificate of Status Desired |   | \$5.00 | Additional     |

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

ST. MARIA, GREGORY 118 CALOOSA DRIVE BABSON PARK, FL 33827

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

|                                       | named entity submits this statement for the purpose of changing<br>ions of registered agent.  | g its registere | d office or regis                     | stered ag  | ent, or both, | n the State o | of Florida. I an               | n familiar with                 | , and accept                |
|---------------------------------------|---|-----------------|---------------------------------------|------------|---------------|---------------|--------------------------------|---------------------------------|-----------------------------|
| SIGNATURE                             |   |                 | Agent signature requ                  | instating) | DATE          |               |                                |                                 |                             |
|                                       | NOW!!! FEE IS \$138.75<br>1, 2008 Fee will be \$538.75  |                 |                                       |            |               |               | 300001889<br>2708—270          |                                 | 143.75                      |
| 9.                                    | MANAGING MEMBERS/MANAGERS   |                 | · · · · · · · · · · · · · · · · · · · |            |               |               |                                |                                 |                             |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM<br>ST. MARIA, GREGORY<br>118 CALOOSA DRIVE<br>BABSON PARK, FL 33827  |                 |                                       | -          | •             |               |                                |                                 |                             |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR<br>ST. MARIA, LINDA<br>118 CALOOSA DRIVE<br>BABSON PARK, FL 33827   |                 |                                       |            |               | 8             |                                | •                               |                             |
| NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   | ;               | ·                                     | •          | DO N          | TOI           | WRIT                           | E                               |                             |
| TITLE NAME STREET ADDRESS CITY+ST-ZIP |   | :               |                                       |            | IN T          | HIS S         | SPAC                           | <b>E</b> ,                      |                             |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP |   |                 |                                       |            | . •           |               | ,                              |                                 |                             |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP |   |                 |                                       |            |               | **            |                                |                                 |                             |
| indicated                             | certify that the information supplied with this filing does not qual on this report is true and accurate and that my signature shall bility company on the receiver or trustee empowered to execute | have the sam    | ne legal effect a                     | as if made | e under oath. | that I am a   | tes I further c<br>managing me | ertify that the<br>ember or mar | information<br>nager of the |

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE