

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000040227

**FILED**  
**Jul 13, 2006**  
**Secretary of State**

**Entity Name:** FIELD MANAGEMENT SERVICES, LLC

**Current Principal Place of Business:**

505 EAST DRURY AVE.  
KISSIMMEE, FL 34744

**New Principal Place of Business:**

**Current Mailing Address:**

505 EAST DRURY AVE.  
KISSIMMEE, FL 34744

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

ST. GORDON, PAMELA  
3192 SOUTH JOHN YOUNG PARKWAY, SUITE B  
KISSIMMEE, FL 34746 US

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:**

Title: MGRM ( ) Delete  
Name: SMITH, BRIAN D  
Address: 505 EAST DRURY AVE.  
City-St-Zip: KISSIMMEE, FL 34744

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: BRIAN D SMITH

MGRM

07/13/2006

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