# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Apr 24, 2012**
**Secretary of State**

DOCUMENT# L05000100593

**Entity Name:** SUPERIOR TRUST SERVICES, LLC

**Current Principal Place of Business:**

700 MACGLENROSS
OVIEDO, FL 32765

**New Principal Place of Business:**

**Current Mailing Address:**

700 MACGLENROSS
OVIEDO, FL 32765

**New Mailing Address:**

**FEI Number: 74-3186619** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

WILLIAM CERVI
700 MACGLENROSS DR
OVIEDO, FL 32765 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: CERVI, WILLIAM A
Address: 700 MACGLENROSS
City-St-Zip: OVIEDO, FL 32765

Title: MGRM
Name: CERVI, JOSEPH W
Address: 700 MACGLENROSS
City-St-Zip: OVIEDO, FL 32765

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 Statues.

SIGNATURE: WILLIAM A CERVI MGR 04/24/2012

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