

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000101184

Entity Name: PREMIER SERVICES LLC

FILED
May 01, 2008
Secretary of State

Current Principal Place of Business:

4371 NORTHLAKE BLVD. #297
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

4371 NORTHLAKE BOULEVARD #297
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

4371 NORTHLAKE BLVD. #297
PALM BEACH GARDENS, FL 33410

New Mailing Address:

4371 NORTHLAKE BOULEVARD #297
PALM BEACH GARDENS, FL 33410

FEI Number: 04-3834486 FEI Number Applied For () FEI Number Not Applicable () 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:

WILSON, JAMES A
1769 N CONGRESS AVE
WEST PALM BEACH, FL 33401 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 () Delete
Name: WILSON, JAMES A
Address: 1769 N CONGRESS AVE
City-St-Zip: WEST PALM BEACH, FL 33401

Title: VP (X) Delete
Name: SINGLETON, LANITA E
Address: 4371 NORTHLAKE BLVD. #297
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: MRGM () Delete
Name: WILSON, JOSHUA
Address: 1769 N CONGRESS AVE
City-St-Zip: WEST PALM BEACH, FL 33401

Title: MRGM () Delete
Name: WILSON, LATATE
Address: 9176 CHANDLER AVE
City-St-Zip: JACKSONVILLE, FL 32224

Title: MGRM () Delete
Name: WILSON, JONATHAN N
Address: 4686 47TH COURT
City-St-Zip: VERO BEACH, FL 32967

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WILSON, JAMES A
Address: 4371 NORTHLAKE BOULEVARD, #297
City-St-Zip: PALM BEACH GARDENS, FL 33401

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

Title: MRGM (X) Change () Addition
Name: WILSON, JOSHUA
Address: 8232 BAYWOOD VISTA DRIVE
City-St-Zip: ORLANDO, FL 32810

Title: MRGM (X) Change () Addition
Name: WILSON, LATATE
Address: 9176 CHANDLER AVE
City-St-Zip: JACKSONVILLE, FL 32224

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

I hereby certify that the information supplied with this filing does not qualify 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: JAMES A WILSON

MGRM

05/01/2008

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