

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 11, 2006 8:00 am
Secretary of State

04-11-2006 90013 045 ****55.00

DOCUMENT # L05000105374

1. Entity Name
ADVANCED COPY SERVICES LLC



Principal Place of Business
**916 59TH ST. W
BRADENTON, FL 34209**

Mailing Address
**916 59TH ST. W
BRADENTON, FL 34209**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03202006 Chg-LLC CR2E083 (11/05)

4. FEI Number
20-3703548

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**YERGEAU, ARCHILLE J
916 59TH ST. W
BRADENTON, FL 34209**

Name **Christine A Yergeau**

Street Address (P.O. Box Number is Not Acceptable)

916 59th St. W

City **Bradenton**

FL

Zip Code **34209**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Christine A Yergeau** **Christine A. Yergeau** **3/21/06**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE **MGRM** ☒ Delete
NAME **YERGEAU, CHRISTINE A**
STREET ADDRESS **916 59TH ST. W**
CITY-ST-ZIP **BRADENTON, FL 34209**

TITLE **MGRM** ☒ Change ☐ Addition
NAME **ARCHILLE J YERGEAU**
STREET ADDRESS **916 59TH ST W**
CITY-ST-ZIP **BRADENTON, FL 34209**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: **Archille J Yergeau** **Archille J Yergeau** **3-21-06**
SIGNATURE AND TYPED OR PRINTED NAME OF EXISTING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

(941) 761-3313