## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L06000003350

Entity Name: CENTRAL SITE MANAGEMENT, LLC

FILED Jan 28, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

3029 A-1 REYNOLDS RD. LAKELAND, FL 33803

**Current Mailing Address: New Mailing Address:** 

3029 A-1 REYNOLDS RD. LAKELAND, FL 33803

FEI Number: 20-5126598 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

TRAMMEL, KATHRYN ALL FLORIDA FIRM, INC 193 VISTA VIEW AVE 813 DELTONA BLVD STE A EAGLE LAKE, FL 33839 US BOX 1384770 DELTONA, FL 32725 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: CHRISTINA CLARK FOR ALL FLORIDA FIRM, INC

01/28/2009

Electronic Signature of Registered Agent Date

ADDITIONS/CHANGES:

## MANAGING MEMBERS/MANAGERS:

MGRM Title: MGRM () Delete (X) Change ( ) Addition Name:

WALKER, WALLACE J WALKER, WALLACE J Name: 2701 DIXIE RD Address: 1021 LAMP POST LN Address: City-St-Zip: LAKELAND, FL 33801 City-St-Zip: LAKELAND, FL 33809

Title: MGRM Title: MGRM (X) Change ( ) Addition ( ) Delete CALIGUIRE, JODY A Name: CALIGUIRE, JODY A Name:

Address: 128 CALOOSA DR Address: 5901 TERNWATER PL City-St-Zip: BABSON PARK, FL 33827 City-St-Zip: LITHIA, FL 33547

Title: MGRM () Delete Title: MGRM (X) Change ( ) Addition ANDRE, FRANK J ANDRE, FRANK J Name: Name:

Address: 2755 TIGER CREEK TR Address: 128 CALOOSA DR City-St-Zip: LAKE WALES, FL 33898 City-St-Zip: BABSON PARK, FL 33827

Title: MGRM ( ) Delete Title: MGRM (X) Change ( ) Addition

TRAMMEL, KATHRYN Name: Name: TRAMMEL, KATHRYN Address: 193 VISTA VIEW AVE Address: 5755 EAGLEMONT CIRCLE

City-St-Zip: EAGLE LAKE, FL 33839 City-St-Zip: LITHIA, FL 33547

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: CHRISTINA CLARK FOR WALLACE J WALKER **MGRM** 01/28/2009