

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000074593

**FILED**  
**Apr 22, 2010**  
**Secretary of State**

**Entity Name:** GENPOWER SERVICES, LLC

**Current Principal Place of Business:**

2804 HOLLOWAY ROAD  
PLANT CITY, FL 33567

**New Principal Place of Business:**

607 S ALEXANDER STREET  
SUITE 209  
PLANT CITY, FL 33563

**Current Mailing Address:**

2804 HOLLOWAY ROAD  
PLANT CITY, FL 33567

**New Mailing Address:**

607 S ALEXANDER STREET  
SUITE 209  
PLANT CITY, FL 33563

**FEI Number:** 51-0593060

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TOWNSEND, MELODY R  
2804 HOLLOWAY ROAD  
PLANT CITY, FL 33567 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: TOWNSEND, WILLIAM G  
Address: 2804 HOLLOWAY ROAD  
City-St-Zip: PLANT CITY, FL 33567

Title: MGRM  
Name: TOWNSEND, MELODY R  
Address: 2804 HOLLOWAY ROAD  
City-St-Zip: PLANT CITY, FL 33567

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 Statutes.

SIGNATURE: MELODY R TOWNSEND

MGRM

04/22/2010

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