

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000080303

FILED  
Apr 12, 2007  
Secretary of State

**Entity Name:** TREASURY SALES & SERVICES LLC

**Current Principal Place of Business:**

3815 NORTHRIDGE DRIVE  
VALRICO, FL 33594

**New Principal Place of Business:**

**Current Mailing Address:**

3815 NORTHRIDGE DRIVE  
VALRICO, FL 33594

**New Mailing Address:**

**FEI Number:** 20-5370317

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ANGELICI, LINA ESQ  
ONE TAMPA CITY CENTER STE 2600  
TAMPA, FL 33602 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Change (X) Addition  
Name: STICKELER, CARL A MR.  
Address: 3815 NORTHRIDGE DRIVE  
City-St-Zip: VALRICO, FL 33594

I hereby certify that the information supplied with this filing does not qualify for the 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: CARL STICKELER

MGRM

04/12/2007

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