

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000082238

FILED  
Mar 24, 2008  
Secretary of State

Entity Name: ACCOUNTING CENTER FOR SMALL BUSINESS LLC

**Current Principal Place of Business:**

5701 DOGWOOD DR  
ORLANDO, FL 32807

**New Principal Place of Business:**

**Current Mailing Address:**

5701 DOGWOOD DR  
ORLANDO, FL 32807

**New Mailing Address:**

FEI Number: 59-3304493

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RIVERA, EVELINDA  
5701 DOGWOOD DR  
ORLANDO, FL 32807 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: RIVERA, EVELINDA  
Address: 16356 BRISTOL LAKE CIRCLE.  
City-St-Zip: ORLANDO, FL 32828

Title: MGR ( ) Delete  
Name: CINTRON, FREDERICK  
Address: 16356 BRISTOL LAKE CIRCLE.  
City-St-Zip: ORLANDO, FL 32828

Title: MGR ( ) Delete  
Name: CINTRON, JESSICA  
Address: 16356 BRISTOL LAKE CIRCLE.  
City-St-Zip: ORLANDO, FL 32828

Title: MGR ( ) Delete  
Name: CINTRON, FREDERICK R  
Address: 16356 BRISTOL LAKE CIRCLE.  
City-St-Zip: ORLANDO, FL 32828

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: RIVERA, EVELINDA  
Address: 5701 DOGWOOD DR  
City-St-Zip: ORLANDO, FL 32807

Title: MGR (X) Change ( ) Addition  
Name: CINTRON, FREDERICK  
Address: 5701 DOGWOOD DR  
City-St-Zip: ORLANDO, FL 32807

Title: MGR (X) Change ( ) Addition  
Name: CINTRON, FREDERICK R  
Address: 5701 DOGWOOD DR  
City-St-Zip: ORLANDO, FL 32807

Title: MGR (X) Change ( ) Addition  
Name: CRUZ, HECTOR L  
Address: 5701 DOGWOOD DR  
City-St-Zip: ORLANDO, FL 32807

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: EVELINDA RIVERA

MGR

03/24/2008

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