

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000087599

FILED  
Apr 14, 2008  
Secretary of State

**Entity Name:** PREMIER BOOKKEEPING SERVICES, LLC

**Current Principal Place of Business:**

16366 NORTHDAL OAKS BLVD  
TAMPA, FL 33624

**New Principal Place of Business:**

2311 TRIAD LANE  
TAMPA, FL 33618

**Current Mailing Address:**

16366 NORTHDAL OAKS DRIVE  
TAMPA, FL 33624

**New Mailing Address:**

2311 TRIAD LANE  
TAMPA, FL 33618

**FEI Number:** 20-5605923

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FULLER, JEAN A  
16366 NORTHDAL OAKS DRIVE  
TAMPA, FL 33624 US

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

FULLER, JEAN A  
2311 TRIAD LANE  
TAMPA, FL 33618 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:

04/14/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: OWNE ( ) Delete  
Name: FULLER, JEAN A  
Address: 16366 NORTHDAL OAKS DRIVE  
City-St-Zip: TAMPA, FL 33624

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JEAN A. FULLER

OWNE

04/14/2008

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