2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 23, 2009
Secretary of State

DOCUMENT# L06000100959

Entity Name: MANAGEMENT SUPPORT SERVICES, LLC

Current Principal Place of Business:

5152 NORTHRIDGE RD.
107
SARASOTA, FL 34238

New Principal Place of Business:

Current Mailing Address:

PO BOX 18231
SARASOTA, FL 34276

New Mailing Address:

FEI Number: 42-1721529 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HOOPINGARNER, ROBERT B
5152 NORTHRIDGE RD.
107
SARASOTA, FL 34238 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: PRES ( ) Delete
Name: HOOPINGARNER, ROBERT B
Address: PO BOX 18231
City-St-Zip: SARASOTA, FL 34276

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: PRES (X) Change ( ) Addition
Name: HOOPINGARNER, ROBERT B PRES
Address: PO BOX 18231
City-St-Zip: SARASOTA, FL 34276 US

Title: PREW ( ) Change (X) Addition
Name: HOOPINGARNER, ROBERT B PRES
Address: 5152 NORTHRIDGE RD. #107
City-St-Zip: SARASOTA, FL 34238 US

Title: PRES ( ) Change (X) Addition
Name: HOOPINGARNER, ROBERT B PRES
Address: PO BOX 18231
City-St-Zip: SARASOTA, FL 34276 US

Title: PRES ( ) Change (X) Addition
Name: HOOPINGARNER, ROBERT B PRES
Address: PO BOX 18231
City-St-Zip: SARASOTA, FL 34276 US

Title: PRES ( ) Change (X) Addition
Name: HOOPINGARNER, ROBERT B PRES
Address: PO BOX 18231
City-St-Zip: SARASOTA, FL 34276 US

Title: PRES ( ) Change (X) Addition
Name: HOOPINGARNER, ROBERT B PRES
Address: PO BOX 18231
City-St-Zip: SARASOTA, FL 34276 US

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: ROBERT B. HOOPINGARNER PRES 04/23/2009

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