

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000112000

**FILED**  
**Feb 18, 2011**  
**Secretary of State**

**Entity Name:** ALL INCLUSIVE COMPUTER SERVICES LLC

**Current Principal Place of Business:**

6149 E QUINCY STREET  
INVERNESS, FL 34452

**New Principal Place of Business:**

6033 E NOBLE LANE  
INVERNESS, FL 34452

**Current Mailing Address:**

PO BOX 673  
INVERNESS, FL 34451

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

GODLEWSKI, STANLEY  
6149 E QUINCY STREET  
INVERNESS, FL 34452    US

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

GODLEWSKI, STANLEY  
6033 E NOBLE LANE  
INVERNESS, FL 34452    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: STANLEY GODLEWSKI

02/18/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: GODLEWSKI, STANLEY  
Address: 6033 E NOBLE LANE  
City-St-Zip: INVERNESS, FL 34452

Title: MGRM  
Name: GODLEWSKI, MADALYN  
Address: 6033 E NOBLE LANE  
City-St-Zip: INVERNESS, FL 34452

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: STANLEY GODLEWSKI

MGR

02/18/2011

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