

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000113855

**FILED**  
**Mar 31, 2010**  
**Secretary of State**

**Entity Name:** PROFESSIONAL MOVERS, LLC.

**Current Principal Place of Business:**

13725 NORTH 12TH ST.  
TAMPA, FL 33613

**New Principal Place of Business:**

6911 PARKE EAST BLVD  
SUITE 300  
TAMPA, FL 33610

**Current Mailing Address:**

13725 NORTH 12TH ST.  
TAMPA, FL 33613

**New Mailing Address:**

6911 PARKE EAST BLVD  
SUITE 300  
TAMPA, FL 33610

**FEI Number:** 43-2114503

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LECOMPTE, MORRIS A  
800 2ND AVENUE SOUTH, SUITE 380  
ST. PETERSBURG, FL 33701 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: MR  
Name: BREW, ROBERT S  
Address: 1564 81ST AVE N.  
City-St-Zip: ST. PETERSBURG, FL 33702

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: ROBERT S. BREW

MR.

03/31/2010

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