

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000002582

**FILED**  
**Apr 26, 2010**  
**Secretary of State**

**Entity Name:** CUNNINGHAM SERVICES, LLC

**Current Principal Place of Business:**

3709 SW 42 AVE  
SUITE 1  
GAINESVILLE, FL 32608 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 140729  
GAINESVILLE, FL 32614 US

**New Mailing Address:**

**FEI Number:** 03-0613881

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PYE, THOMAS G  
3909 W NEWBERRY ROAD  
SUITE C  
GAINESVILLE, FL 32607 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  
**Name:** CUNNINGHAM, PATRICK M  
**Address:** 3709 SW 42 AVE, SUITE 1  
**City-St-Zip:** GAINESVILLE, FL 32608 US

**Title:** MGRM  
**Name:** CUNNINGHAM, ROBERTA J  
**Address:** 3709 SW 42 AVE, SUITE 1  
**City-St-Zip:** GAINESVILLE, FL 32608

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:** PATRICK M CUNNINGHAM

MGRM

04/26/2010

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