

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000066051

**FILED**  
**Jan 05, 2011**  
**Secretary of State**

**Entity Name:** ED OSBORNE - REPAIR SERVICE, LLC

**Current Principal Place of Business:**

1284 ST. ANDREWS DR  
ROCKLEDGE, FL 32955

**New Principal Place of Business:**

**Current Mailing Address:**

1284 ST. ANDREWS DR  
ROCKLEDGE, FL 32955

**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:**

OSBORNE, EDWARD L  
1284 ST. ANDREWS DR.  
ROCKLEDGE, FL 32955 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:** MGR  
**Name:** OSBORNE, EDWARD L  
**Address:** 1284 ST. ANDREWS DR.  
**City-St-Zip:** ROCKLEDGE, FL 32955

**Title:** MGRM  
**Name:** OSBORNE, JERRI  
**Address:** 1284 ST. ANDREWS DR.  
**City-St-Zip:** ROCKLEDGE, FL 32955

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:** EDWARD OSBORNE

MR

01/05/2011

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