2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000094741

Entity Name: SUPERIOR LABOR SERVICES IV, LLC

FILED Mar 20, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4425 MARTIN HWY.

PALM CITY, FL 34990 US

Current Mailing Address: New Mailing Address:

P.O. BOX 1097

PO BOX 1097 PALM CITY, FL 34991 US PALM CITY, FL 34991 US

FEI Number: 26-2481364 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WILLIAMSON, JENNIFER L ESQ. WILLIAMSON, JENNIFER L ESQ. 555 COLORADO AVE. 4425 MARTIN HIGHWAY STUART, FL 34994 PALM CITY, FL 34990

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.

ADDITIONS/CHANGES:

SIGNATURE: JENNIFER L. WILLIAMSON, ESQ 03/20/2009

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

MGRM () Delete MGRM (X) Change () Addition

BROWN, MATTHEW S Name: Name: BROWN, MATTHEW S Address: P.O. BOX 1097 Address: P.O. BOX 1097

City-St-Zip: PALM CITY, FL 34991 US City-St-Zip: PALM CITY, FL 34990 US

(X) Change () Addition Title: MGRM () Delete Title: MGRM Name: BROWN, BARRIE L Name: BROWN, BARRIE L

Address: PO BOX 1097 Address: PO BOX 1097

City-St-Zip: PALM CITY, FL 34991 City-St-Zip: PALM CITY, FL 34990

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: BARRIE L. BROWN **MGRM** 03/20/2009