

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000114213

FILED  
Feb 28, 2011  
Secretary of State

**Entity Name:** PROFESSIONAL SUPPORT SERVICES GROUP LLC

**Current Principal Place of Business:**

1920 WEKVIA WAY  
SUITE 301  
WEST PALM BEACH, FL 33411

**New Principal Place of Business:**

1920 WEKVIA WAY  
SUITE 102  
WEST PALM BEACH, FL 334112410 US

**Current Mailing Address:**

1920 WEKIVA WAY  
SUITE 301  
WEST PALM BEACH, FL 33411

**New Mailing Address:**

1920 WEKIVA WAY  
SUITE 102  
WEST PALM BEACH, FL 334112410 US

**FEI Number:** 26-1407518

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HERBST, SETH J  
1395 STATE ROAD 7 SUITE 450  
WELLINGTON, FL 33414 US

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

HERBST, SETH J MD  
1395 STATE ROAD 7, SUITE 450  
WELLINGTON, FL 33414 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: SETH J HERBST, MD

02/28/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: HERBST, SETH J MD  
Address: 1395 STATE ROAD 7, STE 450  
City-St-Zip: WELLINGTON, FL 33414 US

Title: MGR  
Name: BRUNS, CHRISTOPHER C  
Address: 843 UPLAND ROAD  
City-St-Zip: WEST PALM BEACH, FL 33401 US

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: CHRISTOPHER C BRUNS

MR.

02/28/2011

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