

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000116754

**FILED**  
**Mar 09, 2012**  
**Secretary of State**

**Entity Name:** BURGESS MANAGEMENT SERVICES, LLC

**Current Principal Place of Business:**

13709 PROGRESS BOULEVARD  
BOX 35  
ALACHUA, FL 32615

**New Principal Place of Business:**

**Current Mailing Address:**

13709 PROGRESS BOULEVARD  
BOX 35  
ALACHUA, FL 32615

**New Mailing Address:**

**FEI Number:** 32-0223470

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BURGESS, SANDRA V  
15008 N.W. 173RD STREET  
ALACHUA, FL 32615 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:** BURGESS, SANDRA V  
**Address:** 15008 N.W. 173RD STREET  
**City-St-Zip:** ALACHUA, FL 32615

**Title:** MGRM  
**Name:** BURGESS, FRED LEON  
**Address:** 15008 N.W. 173RD STREET  
**City-St-Zip:** ALACHUA, FL 32615

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:** SANDRA V BURGESS

MGRM

03/09/2012

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