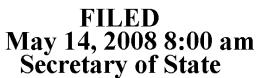
2008 LIMITED LIABILITY COMPANY ANNUAL REPORT



1. Entity Nam	MENT # L07000 ERVICES LLC		05-14-2008 90078 019 ***138.75					
Principal Place of Business 1426 BARN OWL LOOP SANFORD, FL 32773		Mailing Address 1426 BARN OWL LOOF SANFORD, FL 32773	1426 BARN OWL LOOP		,			
2. Principal P	tace of Business - No P.O. Box	# 3. Mailing Address	3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		Chg-LLC	CR2E083 (12/06)		
City & State		City & State	City & State		oer 753262	our Hi	oplied For ot Applicable	
Zip	Country	Zip	Country	5. Certificat	5. Certificate of Status Desired \$5.00 Additional Fee Required			
	6. Name and Address of C		7. Name and Address of New Registered Agent					
			Name	Name				
MORRISON, KENNETH E 1426 BARN OWL LOOP SANFORD, FL 32773			Street Addres	Address (P.O. Box Number is Not Acceptable)				
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
		City	FL.					
	named entity submits this stater tions of registered agent.	ment for the purpose of changing its	registered office or regis	tered agent, or b	oth, in the State of Fig	orida. I am familiar with,	and accept	
SIGNATURE								
	Signature, typed or printed name of register	ed agent and title if applicable. (NOT	E: Registered Agent signature requi	ired when reinstating)	T	DATE		
	E NOW!!! FEE IS \$138.7 by September 12, 2008	s. 607.193(2)(b), F.S., d not receive the prior r		1	e check payable to Department of State	B .		
9.	MANAGING N	MEMBERS/MANAGERS	10,		ADDITIONS/	CHANGES		
TITLE	MGR	Delete	TITLE			☐ Change	Addition	
NAME CYDEET ADDRESS	MORRISON, KENNETH E	6.	NAME STREET ADORESS					
STREET ADDRESS CITY-ST-ZIP	1426 BARN OWL LOOP SANFORD, FL 32773		STREET ADORESS CITY-ST-ZIP					
TITLE		☐ Delete	TITLE			☐ Change	☐ Addition	
NAME			NAME					
STREET ADDRESS CITY-ST-ZIP	<u> </u>		STREET ADDRESS CITY-ST-ZIP					
TITLE		☐ Delete	TILE			☐ Change	☐ Addition	
NAME	}	Li beide	NAME			_ општу		
STREET ADDRESS			STREET ADDRESS					
CITY-ST-ZIP			CTTY-ST-ZIP					
TITLE NAME		☐ Delete	TITLE NAME			☐ Change	☐ Addition	
STREET ADDRESS			STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP					
TITLE		Delete	TILE			Change	Addition	
NAME	j		NAME					
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP			ď.		
TITLE		□ Delete	TITLE			☐ Change	☐ Addition	
NAME		C Delete	NAME					
STREET ADDRESS			STREET ADDRESS					
CITY-ST-ZIP	<u> </u>		CITY-ST-ZIP	·	,*			
indicated	on this report is true and accura	ed with this filing does not quality fo ate and that my signature shall have trustee empowered to execute this	the same legal effect as i	if made under oa	th; that I am a manac	irther certify that the Info jing member or manage	er of the	