

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000120057

FILED
May 05, 2008
Secretary of State

Entity Name: ELITE DOCUMENT SERVICES, LLC

Current Principal Place of Business:

5850 HIATUS ROAD, SUITE E
TAMARAC, FL 33321

New Principal Place of Business:

9600 W SAMPLE ROAD
SUITE 200
CORAL SPRINGS, FL 33065

Current Mailing Address:

5850 HIATUS ROAD, SUITE E
TAMARAC, FL 33321

New Mailing Address:

9600 W SAMPLE ROAD
SUITE 200
CORAL SPRINGS, FL 33065

FEI Number: 26-1497446 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

BARRAU, HEATHER M
5850 HIATUS ROAD, SUITE E
TAMARAC, FL 33321 US

Name and Address of New Registered Agent:

BARRAU, HEATHER M MGR
9600 W SAMPLE ROAD
SUITE 200
CORAL SPRINGS, FL 33065 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: HEATHER M BARRAU

05/05/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BARRAU, HEATHER M
Address: 5850 HIATUS ROAD, SUITE E
City-St-Zip: TAMARAC, FL 33321

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BARRAU, HEATHER M
Address: 9600 W SAMPLE ROAD
City-St-Zip: CORAL SPRINGS, FL 33065

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: HEATHER M BARRAU

MGR

05/05/2008

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