

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000120856

**FILED**  
**Mar 01, 2011**  
**Secretary of State**

**Entity Name:** PRECISION EQUIPMENT SERVICES, LLC

**Current Principal Place of Business:**

5337 SILVER CHARM TERRACE  
WESLEY CHAPEL, FL 33544 US

**New Principal Place of Business:**

**Current Mailing Address:**

5450 BRUCE B DOWNS BLVD  
361  
WESLEY CHAPEL, FL 33544 US

**New Mailing Address:**

**FEI Number:** 11-3829198

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CRAWFORD, DON  
5337 SILVER CHARM TERRACE  
WESLEY CHAPEL, FL 33544 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:** CEO  
**Name:** CRAWFORD, DON  
**Address:** 5337 SILVER CHARM TERRACE  
**City-St-Zip:** WESLEY CHAPEL, FL 33544 US

**Title:** VP  
**Name:** CRAWFORD, CINDY  
**Address:** 5337 SILVER CHARM TER  
**City-St-Zip:** WESLEY CHAPEL, FL 33544

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:** DONALD CRAWFORD

CEO

03/01/2011

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