## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000051312

Entity Name: FMO SERVICE LLC

FILED Apr 28, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1475 WOODLAKE DRIVE APT 225

LAKELAND, FL 33803 US

Current Mailing Address: New Mailing Address:

P.O.BOX 2265 1475 WOODLAKE DRIVE

LAKELAND, FL 33806 US APT 225 LAKELAND, FL 33803 US

FEI Number: 26-2679735 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ORELLANA, JHON C
1475 WOODLAKE DRIVE
APT 225
LAKELAND, FL 33803 US
ORELLANA, BETSY D
1475 WOODLAKE DRIVE
APT 225
LAKELAND, FL 33803 US
LAKELAND, FL 33803 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: BETSY D ORELLANA 04/28/2009

Electronic Signature of Registered Agent Date

ADDITIONS/CHANGES:

(X) Change ( ) Addition

Title:

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete

 Name:
 ORELLANA, JHON C
 Name:
 ORELLANA, BETSY D

 Address:
 P.O.BOX 2265
 Address:
 1475 WOODLAKE DR, APT 225

 City-St-Zip:
 LAKELAND, FL 33806 US
 City-St-Zip:
 LAKELAND, FL 33803 US

Title: MGR (X) Delete Title: ( ) Change ( ) Addition

 Name:
 ORELLANA, BÉTSY D
 Name:

 Address:
 1475 WOODLAKE DR, APT 225
 Address:

 City-St-Zip:
 LAKELAND, FL 33803 US
 City-St-Zip:

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: BETSY D ORELLANA MGRM 04/28/2009