

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000058637

**FILED**  
**Apr 23, 2012**  
**Secretary of State**

**Entity Name:** CENTRAL FLORIDA ODD JOBS, LLC

**Current Principal Place of Business:**

3465 RALEIGH DRIVE  
WINTER HAVEN, FL 33884

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 7547  
WINTER HAVEN, FL 33883

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

MOODY, JOE MGRM  
3465 RALEIGH DR.  
WINTER HAVEN, FL 33884 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: MOODY, JOE  
Address: 3465 RALEIGH DRIVE  
City-St-Zip: WINTER HAVEN, FL 33884

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: JOE MOODY

MGRM

04/23/2012

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