

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000083769

Entity Name: DRY RESCUE SERVICES LLC

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

220 TROTting TRAIL  
OSTEEN, FL 32764

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 236  
OSTEEN, FL 32764

**New Mailing Address:**

220 TROTting TRAIL  
OSTEEN, FL 32764

FEI Number: 26-3290863

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STEPHENS, CHARLES L JR  
220 TROTting TRAIL  
OSTEEN, FL 32764 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: STEPHENS, CHARLES L JR  
Address: 220 TROTting TRAIL  
City-St-Zip: OSTEEN, FL 32764

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: CHARLES L. STEPHENS JR.

MGRM

04/28/2011

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