

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000087968

FILED
Apr 03, 2009
Secretary of State

Entity Name: AMERICA'S COMPANION SERVICES, LLC

Current Principal Place of Business:

4907 LILLIAN HWY
PENSACOLA, FL 32506

New Principal Place of Business:

240 RIOLA PLACE
PENSACOLA, FL 32506

Current Mailing Address:

P O BOX 36173
PENSACOLA, FL 32516

New Mailing Address:

FEI Number: 35-2346605

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARSONS, ANDREA W MS.
4907 LILLIAN HWY
PENSACOLA, FL 32506 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: MGR () Delete
Name: PARSONS, ANDREA W MS.
Address: 240 RIOLA PLACE
City-St-Zip: PENSACOLA, FL 32506

Title: MGR () Delete
Name: PARSONS, KENNETH D MR.
Address: 240 RIOLA PLACE
City-St-Zip: PENSACOLA, FL 32506

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: ANDREA W PARSONS

MGR

04/03/2009

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