

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000094541

**FILED**  
**Mar 15, 2011**  
**Secretary of State**

**Entity Name:** SP CUSTOMER SERVICE, LLC

**Current Principal Place of Business:**

163 W Highbanks Rd  
DeBary, FL 32713

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 530721  
DeBary, FL 32753

**New Mailing Address:**

FEI Number: 26-3496872

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PICKETT, SOPHIA A  
163 W Highbanks Rd  
DeBary, FL 32713 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  
Name: PICKETT, SOPHIA A  
Address: PO BOX 530721  
City-St-Zip: DeBary, FL 32753

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: SOPHIA A PICKETT

MGR

03/15/2011

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