

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000032473

FILED
Jan 10, 2011
Secretary of State

Entity Name: NATIVE CONTROL SERVICES, LLC

Current Principal Place of Business:

1191S.W. ALEXANDRIA AVENUE
PORT ST. LUCIE, FL 34985 US

New Principal Place of Business:

1191 SW ALEXANDRIA AVE
PORT ST. LUCIE, FL 34953 US

Current Mailing Address:

1191 S.W. ALEXANDRIA AVENUE
PORT ST. LUCIE, FL 34985 US

New Mailing Address:

1191 SW ALEXANDRIA AVE
PORT ST. LUCIE, FL 34953 US

FEI Number: 26-4594308

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEACON ACCOUNTING SERVICE, INC.
3135 S.W. MAPP ROAD
PALM CITY, FL 34990 US

Name and Address of New Registered Agent:

SCARMARDO, TIFFANY L
1191 SW ALEXANDRIA AVE
PORT ST LUCIE, FL 34953 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: TIFFANY L SCARMARDO

01/10/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: SCARMARDO, TIFFANY L
Address: 1191 SW ALEXANDRIA AVE
City-St-Zip: PORT ST. LUCIE, FL 34953 US

Title: MGR
Name: ENGLISH III, JOHN L
Address: 992 S.E. CANDLE AVE
City-St-Zip: PORT ST. LUCIE, FL 34985 US

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: TIFFANY L SCARMARDO

MGR

01/10/2011

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