

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000062627

**FILED**  
**Mar 16, 2012**  
**Secretary of State**

**Entity Name:** P.R.O. HOME SERVICES LLC

**Current Principal Place of Business:**

24600 SOUTH TAMIAMI TRAIL  
SUITE 212, PMB 352  
BONITA SPRINGS, FL 34134 US

**New Principal Place of Business:**

26430 DOVERSTONE STREET  
BONITA SPRINGS, FL 34135 US

**Current Mailing Address:**

24600 SOUTH TAMIAMI TRAIL  
SUITE 212, PMB 352  
BONITA SPRINGS, FL 34134 US

**New Mailing Address:**

26430 DOVERSTONE STREET  
BONITA SPRINGS, FL 34135 US

**FEI Number:** 27-0478675

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BOWSER, BILLIE J  
24600 SOUTH TAMIAMI TRAIL  
SUITE 212, PMB 352  
BONITA SPRINGS, FL 34134 US

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

BOWSER, BILLIE J  
26430 DOVERSTONE STREET  
BONITA SPRINGS, FL 34135 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: BILLIE JO BOWSER

03/16/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BOWSER, STEPHEN D  
Address: 2643DOVERSTONE STREET  
City-St-Zip: BONITA SPRINGS, FL 34135 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: STEVE BOWSER

OWNE

03/16/2012

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