

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000065757

**FILED**  
**Mar 31, 2010**  
**Secretary of State**

**Entity Name:** ACCOUNTING MANAGEMENT SERVICES OF CENTRAL FL, L.L.C.

**Current Principal Place of Business:**

2344 CRESTOVER LN  
WESLEY CHAPEL, FL 33544

**New Principal Place of Business:**

**Current Mailing Address:**

17905 CACHET ISLE DR  
TAMPA, FL 33647

**New Mailing Address:**

**FEI Number:** 59-2968425

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RAMOS, JOSE S TRUSTEE  
2344 CRESTOVER LN  
WESLEY CHAPEL, FL 33544 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:** RAMOS, MINERVA F TRUSTEE  
**Address:** 17905 CACHET ISLE DR  
**City-St-Zip:** TAMPA, FL 33647

**Title:** MGR  
**Name:** RAMOS, JOSE S TRUSTEE  
**Address:** 17905 CACHET ISLE DR  
**City-St-Zip:** TAMPA, FL 33647

**Title:** MGR  
**Name:** DYKES, DIANA C  
**Address:** 2344 CRESTOVER LN  
**City-St-Zip:** WESLEY CHAPEL, FL 33544

**Title:** MGR  
**Name:** ILDEFONSO, ANA  
**Address:** 2344 CRESTOVER LN  
**City-St-Zip:** WESLEY CHAPEL, FL 33544

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:** MINERVA F RAMOS

MRM

03/31/2010

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