

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000068286

**FILED**  
**Apr 29, 2010**  
**Secretary of State**

**Entity Name:** CITIZENS SERVING THE COMMUNITY, LLC

**Current Principal Place of Business:**

16350 BRUCE B DOWNS BLVD.  
46986  
TAMPA, FL 33647

**New Principal Place of Business:**

16350 BRUCE B DOWNS BLVD.  
# 46986  
TAMPA, FL 33647

**Current Mailing Address:**

16350 BRUCE B DOWNS BLVD.  
46986  
TAMPA, FL 33647

**New Mailing Address:**

16350 BRUCE B DOWNS BLVD.  
PO BOX 46986  
TAMPA, FL 33647

**FEI Number:** 27-0550676

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEONARD,, ROBERT D  
16350 BRUCE B DOWNS BLVD.  
46986  
TAMPA, FL 33647 US

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

LEONARD,, ROBERT D  
16350 BRUCE B DOWNS BLVD.  
# 46986  
TAMPA, FL 33647 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: ROBERT LEONARD

04/29/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: LEONARD, ROBERT D  
Address: 16350 BRUCE B DOWNS BLVD # 46986  
City-St-Zip: TAMPA, FL 33647

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: ROBERT LEONARD

MGR

04/29/2010

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