

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000109669

**Entity Name:** M & S SERVICE CENTER LLC

**FILED**  
**Feb 13, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1009 S.14TH STREET (HWY 27)  
LEESBURG, FL 34748 US

**New Principal Place of Business:**

**Current Mailing Address:**

11535 GRACES WAY  
CLERMONT, FL 34711 US

**New Mailing Address:**

**FEI Number:** 27-1354321

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HEALEY, STEVEN  
11535 GRACES WAY  
CLERMONT, FL 34711 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:** HEALEY, STEVEN  
**Address:** 11535 GRACES WAY  
**City-St-Zip:** CLERMONT, FL 34711 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: STEVEN HEALEY

MGRM

02/13/2012

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