

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000008865

**FILED**  
**Jan 27, 2011**  
**Secretary of State**

**Entity Name:** RESERVE SPECIALISTS, LLC

**Current Principal Place of Business:**

1020 8TH AVENUE S, SUITE 11  
NAPLES, FL 34102

**New Principal Place of Business:**

1020 8TH AVENUE S  
SUITE 11  
NAPLES, FL 34102

**Current Mailing Address:**

1020 8TH AVENUE S, SUITE 11  
NAPLES, FL 34102

**New Mailing Address:**

1020 8TH AVENUE S  
SUITE 11  
NAPLES, FL 34102

**FEI Number:** 27-1985080

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CROSS STREET CORPORATE SERVICES, LLC  
200 SOUTH ORANGE AVENUE  
SARASOTA, FL 34236 US

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

LOGAN, CHARLES L  
1020 8TH AVENUE S  
SUITE 11  
NAPLES, FL 34102 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: CHARLES L. LOGAN

01/27/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MR.  
Name: TOWNSEND, ROBERT N  
Address: 1020 8TH AVENUE S, SUITE 11  
City-St-Zip: NAPLES, FL 34102

Title: MR.  
Name: LOGAN, CHARLES L  
Address: 1020 8TH AVENUE S, SUITE 11  
City-St-Zip: NAPLES, FL 34102

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: CHARLES L LOGAN

MNGR

01/27/2011

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