2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 18, 2011
Secretary of State

DOCUMENT# L10000057270

Entity Name: OPTIMA BUSINESS SERVICES, LLC

Current Principal Place of Business:

4229 SW HIGH MEADOWS AVENUE
PALM CITY, FL 34990 US

New Principal Place of Business:

Current Mailing Address:

4229 SW HIGH MEADOWS AVENUE
PALM CITY, FL 34990 US

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LOZEAU, LOUIS E JR
1002 SE MONTEREY COMMONS BLVD
100
STUART, FL 34996 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: MACKIE, STEPHAN C
Address: 4229 SW HIGH MEADOWS AVENUE
City-St-Zip: PALM CITY, FL 34990 US

Title: MGRM
Name: WALLIN, RANDAL C
Address: 4229 SW HIGH MEADOWS AVENUE
City-St-Zip: PALM CITY, FL 34990 US

Title: MGRM
Name: KATRI, MICHAEL J
Address: 4229 SW HIGH MEADOWS AVENUE
City-St-Zip: PALM CITY, FL 34990 US

Title: MGRM
Name: KATRI, RYAN M
Address: 4229 SW HIGH MEADOWS AVENUE
City-St-Zip: PALM CITY, FL 34990 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 Statues.

SIGNATURE: STEPHAN MACKIE MGRM 02/18/2011
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date