

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000081880

**FILED**  
**Sep 13, 2011**  
**Secretary of State**

**Entity Name:** TASK ORDER SERVICES PRO LLC

**Current Principal Place of Business:**

805 SAXON BLVD  
DELTONA, FL 32725 US

**New Principal Place of Business:**

**Current Mailing Address:**

805 SAXON BLVD  
DELTONA, FL 32725 US

**New Mailing Address:**

**FEI Number:** 27-3181786

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COLF, ROBERT L JR  
805 SAXON BLVD  
DELTONA, FL 32725 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:** MGR  
**Name:** COLF, ROBERT L JR  
**Address:** 805 SAXON BLVD  
**City-St-Zip:** DELTONA, FL 32725

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 COLF

PRES

09/13/2011

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