

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000006839

**FILED**  
**Apr 10, 2012**  
**Secretary of State**

**Entity Name:** ROBERT JAMES WILSON'S TOWER SERVICES, LLC

**Current Principal Place of Business:**

6075 SHINGLER AVE.  
SPRING HILL, FL 34608

**New Principal Place of Business:**

452 RIO VISTA CT  
SPRING HILL, FL 34608

**Current Mailing Address:**

6075 SHINGLER AVE.  
SPRING HILL, FL 34608

**New Mailing Address:**

452 RIO VISTA CT  
SPRING HILL, FL 34608

**FEI Number:** 27-4585163

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WILSON, ROBERT J JR  
6075 SHINGLER AVE.  
SPRING HILL, FL 34608 US

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

WILSON, ROBERT J JR  
452 RIO VISTA CT  
SPRING HILL, FL 34608 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 J WILSON JR

04/10/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** WILSON, ROBERT J JR  
**Address:** 452 RIO VISTA CT  
**City-St-Zip:** SPRING HILL, FL 34608

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 WILSON

MGRM

04/10/2012

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