

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000086971

**Entity Name:** SIZEMORE SERVICES, LLC

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

2401 GREEN DOLPHIN CIRCLE  
TARPON SPRINGS, FL 34689

**New Principal Place of Business:**

1504 GEORGIA AVE  
PALM HARBOR, FL 34683

**Current Mailing Address:**

2401 GREEN DOLPHIN CIRCLE  
TARPON SPRINGS, FL 34689

**New Mailing Address:**

1504 GEORGIA AVE  
PALM HARBOR, FL 34683

**FEI Number:** 45-2859318

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PATTERSON, ELIZABETH A  
914 WHIPPOORWILL DR  
PALM HARBOR, FL 34683 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:** SIZEMORE, WAYNE  
**Address:** 1504 GEORGIA AVE  
**City-St-Zip:** PALM HARBOR, FL 34683

**Title:** MGRM  
**Name:** SIZEMORE, SHEILA  
**Address:** 1504 GEORGIA AVE  
**City-St-Zip:** PALM HARBOR, FL 34683

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:** WAYNE SIZEMORE

MGR

04/30/2012

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