

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 90040 007 ****50.00

DOCUMENT # M02000002130

1. Entity Name
RESPONSE SERVICES CENTER, LLC



Principal Place of Business
**1000 AAA DRIVE
HEATHROW, FL 32746**

Mailing Address
**PO BOX 953935
LAKE MARY, FL 32795**

24053794



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04022004 Chg-LLC CR2E083 (10/03)

City & State

City & State

4. FEI Number
06-1563320

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**NRAI SERVICES, INC.
526 E. PARK AVENUE
TALLAHASSEE, FL 32301**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2004**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGR
DONEY, MARSHALL
1000 AAA DRIVE, M/S 15
HEATHROW, FL 32746** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGR
Tom Keyes
90 East Wilson Bridge Rd.
Worthington, OH 43085** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGR
BROWN, MARK
1000 AAA DRIVE, M/S 15
HEATHROW, FL 32746** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGR
FELLS, DON
150 VAN NESS AVENUE
SAN FRANCISCO, CA 94102** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGR
JOHNSON, KENNETH A
12901 N FORTY DRIVE
ST LOUIS, MO 63141** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGR
MCKERNAN, THOMAS V JR
3333 FAIRVIEW ROAD
COSTA MESA, CA 926261698** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGR
GUTOWSKI, GERALD S
ONE AUTO CLUB DRIVE
DEARBORN, MI 48126** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:
SIGNATURE AND TYPED OR PRINTED NAME OF SAVING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

John G. Schaffer, CFO

Authorized Rep

407-444-7116

Date

Daytime Phone #