

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000000909

FILED
May 20, 2005
Secretary of State

Entity Name: VALUED SERVICES OF FLORIDA, LLC

Current Principal Place of Business:

750 BROAD ST, NW
CLEVELAND, TN 37311

New Principal Place of Business:

600 WESTPARK DRIVE
PEACHTREE CITY, GA 30269

Current Mailing Address:

750 BROAD ST, NW
CLEVELAND, TN 37311

New Mailing Address:

600 WESTPARK DRIVE
PEACHTREE CITY, GA 30269

FEI Number: 20-0771501 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE STE 4
WESTON, FL 33331 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/MEMBERS:

Title: MGR () Delete
Name: SCOGGINS, JAMES E
Address: 245 PERIMETER CENTER PKWY #600
City-St-Zip: ATLANTA, GA 30346

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SCOGGINS, JAMES E
Address: 600 WESTPARK DRIVE
City-St-Zip: PEACHTREE CITY, GA 30269

Title: MGR () Change (X) Addition
Name: MANNING, ROBERT P
Address: 600 WESTPARK DRIVE
City-St-Zip: PEACHTREE CITY, GA 30269

I hereby certify that the information supplied with this filing does not qualify for the 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 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 P MANNING

MGR

05/20/2005

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