

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M04000001034

**FILED**  
**Feb 03, 2012**  
**Secretary of State**

**Entity Name:** OPS CONTRACTING SERVICES, LLC

**Current Principal Place of Business:**

5669 SUMMER AVENUE  
MEMPHIS, TN 38134

**New Principal Place of Business:**

**Current Mailing Address:**

200 NORTH 2ND STREET  
NASHVILLE, TN 37213

**New Mailing Address:**

**FEI Number:** 36-4351384

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ENSAFE, INC.  
4812 RANDEE CIRCLE  
PENSACOLA, FL 32526 US

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

ENSAFE, INC.  
4720 SALISBURY ROAD  
JACKSONVILLE, FL 32256 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: \_\_\_\_\_

Electronic Signature of Registered Agent

02/03/2012

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: COOP, PHILLIP  
Address: 5724 SUMMER TREES DR.  
City-St-Zip: MEMPHIS, TN 38134 US

Title: MGR  
Name: WOOD, MICHAEL  
Address: 5724 SUMMER TREES DRIVE  
City-St-Zip: MEMPHIS, TN 38134 US

Title: MGR  
Name: BACKUS, WILLIAM D  
Address: 5724 SUMMER TREES DRIVE  
City-St-Zip: MEMPHIS, TN 38134

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: MICHAEL A. WOOD

MGR

02/03/2012

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