## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M05000001208

Entity Name: LINC FACILITY SERVICES, LLC

**FILED** May 01, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1201 LOUISIANA AVE. **1221 LAMAR SUITE 2700 SUITE 1500** 

HOUSTON, TX 77002 HOUSTON, TX 77010

**New Mailing Address: Current Mailing Address:** 

1201 LOUISIANA AVE. **1221 LAMAR SUITE 2700** SUITE 1500

HOUSTON, TX 77002 HOUSTON, TX 77010

FEI Number: 20-0356995 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: Name and Address of New Registered Agent:

NRAI SERVICES, INC 526 E. PARK AVENUE

TALLAHASSEE, FL 32301 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:

Date

ADDITIONS/CHANGES:

Electronic Signature of Registered Agent

MANAGING MEMBERS/MANAGERS:

Title: () Delete (X) Change ( ) Addition

BREMNER, SUZANNE BREMNER, SUZANNE Name: Name: 1201 LOUISIANA AVE., SUITE 2700 Address: 1201 LOUISIANA AVE., SUITE 2700 Address:

City-St-Zip: HOUSTON, TX 770025678 City-St-Zip: HOUSTON, TX 770025678

(X) Change ( ) Addition Title: MGR () Delete Title: ROGERS, PHILIP B Name: ROGERS, PHILIP B Name:

Address: 1201 LOUISIANA, SUITE 2700 Address: 1201 LOUISIANA, SUITE 2700 City-St-Zip: HOUSTON, TX 77002 City-St-Zip: HOUSTON, TX 77002

Title: MGR () Delete Title: (X) Change ( ) Addition FOWLER, JAMES C FOWLER, JAMES C Name: Name:

1201 LOUISIANA, SUITE 2700 1201 LOUISIANA, SUITE 2700 Address: Address: City-St-Zip: HOUSTON, TX 77002 City-St-Zip: HOUSTON, TX 77002

Title: MGR () Delete Title: CEO (X) Change ( ) Addition

Name: FRANZ, JOSEPH Name: FRANZ, JOSEPH 1201 LOUISIANA, SUITE 2700 1201 LOUISIANA, SUITE 2700 Address: Address: HOUSTON, TX 77002 City-St-Zip: HOUSTON, TX 77002 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: SUZANNE BREMNER 05/01/2009