

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 28, 2008 8:00 am**  
**Secretary of State**

04-28-2008 90050 038 \*\*\*138.75

**DOCUMENT # M06000006271**

1. Entity Name  
**FARMERS SERVICES, LLC**



Principal Place of Business  
**4680 WILSHIRE BLVD.  
LOS ANGELES, CA 90010**

Mailing Address  
**4680 WILSHIRE BLVD.  
LOS ANGELES, CA 90010**

**60030413**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04222008 Chg-LLC CR2E083 (12/06)

City & State

City & State

4. FEI Number

**35-2281892**

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

**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525**

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

**FILE NOW!!! FEE IS \$138.75  
After May 1, 2008 Fee will be \$538.75**

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

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE MGR ☒ Delete  
NAME SCHOFIELD, KEITHA  
STREET ADDRESS 4680 WILSHIRE BLVD.  
CITY-ST-ZIP LOS ANGELES, CA 90010

TITLE Member-Managed ☐ Change ☒ Addition  
NAME ZFUS SERVICES LLC  
STREET ADDRESS 1400 American Lane  
CITY-ST-ZIP Schaumburg, IL 60196-1056

TITLE MGR ☒ Delete  
NAME FRANKLIN, JAN  
STREET ADDRESS 4680 WILSHIRE BLVD.  
CITY-ST-ZIP LOS ANGELES, CA 90010

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

TITLE MGR ☒ Delete  
NAME MCDANIEL, LYNN  
STREET ADDRESS 5600 BEECH TREE LANE  
CITY-ST-ZIP CALEDONIA, MI 49316

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

TITLE V ☒ Delete  
NAME KLUTER, PETER  
STREET ADDRESS 4680 WILSHIRE BLVD  
CITY-ST-ZIP LOS ANGELES, CA 90010

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

**ZFUS Services, LLC-Member  
Jan Franklin, Its Vice President**

Date

Daytime Phone #

**4/24/08**