

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000101283

Entity Name: LIBERTY LIMOUSINE SERVICE, INC.

FILED  
Apr 29, 2008  
Secretary of State

## Current Principal Place of Business:

706 14TH AVE  
VERO BEACH, FL 32962

## New Principal Place of Business:

## Current Mailing Address:

706 14TH AVE  
VERO BEACH, FL 32962

## New Mailing Address:

FEI Number: 59-3750732

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SIGUENZA, HELEN A  
706 14TH AVE  
VERO BEACH, FL 32962 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: AV (X) Delete  
Name: KORMAN, MICHAEL  
Address: 145 MCKEE LANE  
City-St-Zip: VERO BEACH, FL 32963

Title: AV ( ) Delete  
Name: STEVENS, FRANK  
Address: 84 CROOKED TREE LANE #104  
City-St-Zip: VERO BEACH, FL 32962

Title: P ( ) Delete  
Name: SIGUENZA, HELEN  
Address: 706 14TH AVE  
City-St-Zip: VERO BEACH, FL 32962

Title: AV ( ) Delete  
Name: REILLY, TIMOTHY  
Address: 234 KIWI DR  
City-St-Zip: SEBASTIAN, FL 32976

Title: AV ( ) Delete  
Name: WELCH, LAWRENCE  
Address: 644 LAYPORT DR  
City-St-Zip: SEBASTIAN, FL 32958

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: AV (X) Change ( ) Addition  
Name: STEVENS, FRANK  
Address: 5 VISTA GARDENS TRAIL  
City-St-Zip: VERO BEACH, FL 32962

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: AV (X) Change ( ) Addition  
Name: QUINTERO, FRED  
Address: 1825 20TH AVE  
City-St-Zip: VERO BEACH, FL 32962

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HELEN SIGUENZA

P

04/29/2008

Electronic Signature of Signing Officer or Director

Date