

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000010137

**Entity Name:** FIRST CALL REMOVAL LLC

**Current Principal Place of Business:**

4040 S WATERBRIDGE CIRCLE  
PORT ORANGE, FL 32129

**Current Mailing Address:**

500 NASH LANE  
PORT ORANGE, FL 32127 US

**FEI Number:** 26-4154738

**Certificate of Status Desired:** Yes

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

DELLARATA, JAMES J  
4040 S WATERBRIDGE CIRCLE  
PORT ORANGE, FL 32129 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

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title            PRESIDENT  
Name            DELLARATA, JAMES J  
Address        4040 S WATERBRIDGE CIRCLE  
City-State-Zip: PORT ORANGE FL 32129

Title            VP  
Name            DELLARATA, JOANNE  
Address        500 NASH LANE  
City-State-Zip: PORT ORANGE FL 32127

Title            MANAGER  
Name            PINELLO, JUSTIN  
Address        1036 DERBYSHIRE ROAD  
City-State-Zip: DAYTONA BEACH FL 32117

Title            MANAGER  
Name            CASANOVA, EDDIE  
Address        242 SAND PEBBLE CIRCLE  
City-State-Zip: PORT ORANGE FL 32129

*I hereby 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 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JOANNE DELLARATA

**VICE PRESIDENT**

**04/26/2013**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date