## 2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

## Feb 09, 2006 08:00 AM Secretary of State **DOCUMENT # L02000018956** 1. Entity Name GLOBAL PURCHASING SOLUTIONS, LLC Principal Place of Business Mailing Address 4355 BEVERLY AVE. 4355 BEVERLY AVE. JACKSONVILLE, FL 32210 INCKSONVILLE, FL 3ZZ 10 02072006No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 52-2371385 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MILLER, CHARLES F DO NOT WRITE 4355 BEVERLY AVE. JACKSONVILLE, FL 32210 IN THIS SPACE 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 it applicable. PROTE. Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2006 9. MANAGING MEMBERS/MANAGERS MGRM meNAME MILLER, ROBERT KENT 7109 PEKIN DRIVE STREET ADDRESS U00000428895 02/21/06-80064-023 50.00 City-ST-77 WILLOW SPRINGS, NC 27592 DDF NAME STREET ADDRESS CITY-\$1-27 BILE MAME STREET ADDRESS DO NOT WRITE CITY-ST-7IP

11. I hereby certify that the information supplied with this tiling 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 ATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

TITLE

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CTTY - ST - ZIP

NAME STREET ADDRESS CITY-ST-ZIP

Daythna Phone #

IN THIS SPACE

**FILED**