

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 11, 2008 08:00 A
Secretary of State

DOCUMENT # L06000003416

1. Entity Name
DANIELS COMMERCE HOLDINGS, LLC



Principal Place of Business 3845 HOLCOMB BRIDGE ROAD SUITE 100 NORCROSS, GA 30092 US	Mailing Address 3845 HOLCOMB BRIDGE ROAD SUITE 100 NORCROSS, GA 30092 US
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01032008 No Chg-LLC CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-4085758	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**AGENTS AND CORPORATIONS, INC.
 300 FIFTH AVENUE SOUTH
 SUITE 101-330
 NAPLES, FL 34102**

DO NOT WRITE 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 if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

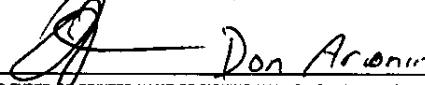
**FILE NOW!!! FEE IS \$138.75
 After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ARONIN, DONALD J 3845 HOLCOMB BRIDGE ROAD, SUITE 100 NORCROSS, GA 30092
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KIRSCHNER, RONALD S 3845 HOLCOMB BRIDGE ROAD, SUITE 100 NORCROSS, GA 30092
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DAMRON, WAYNE 3845 HOLCOMB BRIDGE ROAD, SUITE 100 NORCROSS, GA 30092
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1000000823032
 02/20/08-80020-025 138.75

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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:  **Don Aronin** 1/18/08 770-416-2266

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #