

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000123113

FILED
Mar 06, 2008
Secretary of State

Entity Name: VISIONETIC LABORATORY LLC

Current Principal Place of Business:

6901 TPC DRIVE
SUITE 500
ORLANDO, FL 32822

New Principal Place of Business:

Current Mailing Address:

6901 TPC DRIVE
SUITE 500
ORLANDO, FL 32822

New Mailing Address:

FEI Number: 26-1950475 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LE, TAM VAN T
6901 TPC DRIVE
SUITE 500
ORLANDO, FL 32822 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LE, TAM VAN T
Address: 6901 TPC DRIVE, SUITE 500
City-St-Zip: ORLANDO, FL 32822

Title: MGRM () Delete
Name: KIM, JOSEPH M
Address: 6901 TPC DRIVE, SUITE 500
City-St-Zip: ORLANDO, FL 32822

Title: MGRM () Delete
Name: HOWELL, CALVIN
Address: 6901 TPC DRIVE, SUITE 500
City-St-Zip: ORLANDO, FL 32822

ADDITIONS/CHANGES:

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

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

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

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 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.

SIGNATURE: LE TAMVAN

MGRM

03/06/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date