

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000003289

FILED
Jan 14, 2009
Secretary of State

Entity Name: ECS-FLORIDA, L.L.C.

Current Principal Place of Business:

14026 THUNDERBOLT PLACE, SUITE 600
CHANTILLY, VA 20151

New Principal Place of Business:

Current Mailing Address:

14026 THUNDERBOLT PLACE, SUITE 600
CHANTILLY, VA 20151

New Mailing Address:

FEI Number: 20-1067793

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: V.P. () Delete
Name: BRIDER, RYAN
Address: 2000 AVENUE P, SUITE 3
City-St-Zip: RIVIERA BEACH, FL 33404

Title: PRES () Delete
Name: FIORILLO, ANTHONY
Address: 2815 DIRECTORS ROW, SUITE 500
City-St-Zip: ORLANDO, FL 32809

Title: TRES () Delete
Name: ANDONYADIS, HRISULA
Address: 14026 THUNDERBOLT PLACE, SUITE 600
City-St-Zip: CHANTILLY, VA 20151

Title: VP () Delete
Name: DEBO, LORIE A
Address: 14026 THUNDERBOLT PLACE, SUITE 600
City-St-Zip: CHANTILLY, VA 20151

Title: MGRM () Delete
Name: ECKERT, JAMES A
Address: 14026 THUNDERBOLT PLACE, SUITE 600
City-St-Zip: CHANTILLY, VA 20151

Title: MGRM () Delete
Name: GOEHRING, ROBERT L
Address: 1800 SANDY PLAINS PARKWAY, SUITE 208
City-St-Zip: MARIETTA, GA 30066

ADDITIONS/CHANGES:

Title: V.P. (X) Change () Addition
Name: BRIDGER, RYAN
Address: 2000 AVENUE P, SUITE 3
City-St-Zip: RIVIERA BEACH, FL 33404

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

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

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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: HRISULA ANDONYADIS

TRES

01/14/2009

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