## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED Apr 28, 2008 8:00 am Secretary of State

	AMMOAL	REPURI			~~~	$\sim$		
1. Entity Nam	MENT # M05000005  Trust systems llc	5629			04-28-2008	90060 003 ***13	8.75	
Principal Place 5510 77 CEI CHARLOTTE,	NTER DRIVE	Mailing Address 5510 77 CENTER DRIV CHARLOTTE, NC 2821			030948	I BW:H BB18: #11:8 B318 (1618 18	(### 4     <b>18 </b>	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address PO Box 240382						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		0421200	8 Chg-LLC	CR2E083 (12/06)		
City & State	е	Charlotte,	NC	4. FEI Nu 23-2	mber 139612	<del></del>	oplied For at Applicable	
Zip		28824-0882	Country		atê of Status Desired	\$5:00-Add Fee Require		
	6. Name and Address of Current	Registered Agent		7. Name	and Address of New R	egistered Agent		
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD			Name Street	Name Street Address (P.O. Box Number is Not Acceptable)				
	ION, FL 33324			· · · · · · · · · · · · · · · · · · ·		·		
			City		FL Zip Code			
	named entity submits this statement folions of registered agent.	r the purpose of changing its	registered office of	r registered agent, or	both, in the State of Flo	rida. I am familiar with,	and accept	
SIGNATURE .	Signature, typed or printed name of registered agent	and title if applicable (NOT	E: Registered Agent signs	ture required when reinstating	)	DATE	<del></del>	
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75					Make check payable to Florida Department of State			
9.	MANAGING MEMBE	RS/MANAGERS	10.		ADDITIONS/	CHANGES		
TITLE	MGR	Delete	TITLE	Segment Pra	sident	Change	Addition	
NAME	BIRDWELL, DONALD W	•	NAME	しひみょう 70-00	-1.4	8m		
STREET ADDRESS CITY-ST-ZIP	104 INVERNESS CENTER PLACE BIRMINGHAM, AL 35242	CE, SUITE 325	STREET ADDRESS CITY-ST-ZIP	Low lard .	HieldRd, Ste	18 18		
TITLE NAME	MGR SILBEY, VICTORIA	☐ Delete	TITLE NAME	VA Finance Deboruh G.	- Controller Sulvia	☐ Change	Addition	
STREET ADDRESS	680 E. SWEDESFORD ROAD		STREET ADDRESS	5510 77 Cen	ter Drive			
CITY-ST-ZIP	WAYNE, PA 19087		CITY-ST-ZIP	Charlotte				
RILE	MGR-	☐ Deiene	TITLE	1			- Addition	
NAME	1							
l	RUANE, MICHAEL J	□ Delate	NAME					
STREET ADDRESS	RUANE, MICHAEL J 680 E. SWEDESFORD ROAD	C Detate	STREET ADDRESS					
STREET ADDRESS CITY-ST-ZIP TITLE	RUANE, MICHAEL J	□ Oelete	1			☐ Change	Addition	
CITY-ST-ZIP TITLE NAME	RUANE, MICHAEL J 680 E. SWEDESFORD ROAD		STREET ADDRESS CITY-ST-ZIP TITLE NAME			☐ Change	Addition	
CITY-ST-ZIP TITLE	RUANE, MICHAEL J 680 E. SWEDESFORD ROAD		STREET ADDRESS CITY-ST-ZIP TITLE			☐ Change	☐ Addition	
CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	RUANE, MICHAEL J 680 E. SWEDESFORD ROAD		STREET ADDRESS CITY-SI-ZIP  TITLE NAME STREET ADDRESS			☐ Change	Addition	
CITY-SI-ZIP  TITLE  NAME  STREET ADDRESS  CITY-SI-ZIP  TITLE  NAME	RUANE, MICHAEL J 680 E. SWEDESFORD ROAD	☐ Delete	STREET ADDRESS CITY-S1-ZIP  TITLE NAME STREET ADDRESS CITY-S1-ZIP  TITLE NAME			·		
CITY-SI-ZIP  TITLE  NAME  STREET ADDRESS  CITY-SI-ZIP  TITLE  NAME  STREET ADDRESS	RUANE, MICHAEL J 680 E. SWEDESFORD ROAD	☐ Delete	STREET ADDRESS CITY-S1-ZIP  TITLE NAME STREET ADDRESS CITY-S1-ZIP  TITLE NAME STREET ADDRESS STREET ADDRESS			·		
CITY-SI-ZIP  TITLE  NAME  STREET ADDRESS  CITY-SI-ZIP  TITLE  NAME	RUANE, MICHAEL J 680 E. SWEDESFORD ROAD	☐ Delete	STREET ADDRESS CITY-S1-ZIP  TITLE NAME STREET ADDRESS CITY-S1-ZIP  TITLE NAME			·		

11. I hereby certify that the information supplied with this filling 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.

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: Odorah D. Dylvia, V Pof tingnice	4/21/08	(704)527-6300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANADER, OR AUTHORIZED REPRESENTATIVE	Oate	Daytime Phone #