

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000000723

Entity Name: CITRUS SOLUTIONS I LLC

FILED
Jan 14, 2008
Secretary of State

Current Principal Place of Business:

4600 WELLS FARGO CENTER
MINNEAPOLIS, MN 55402

New Principal Place of Business:

Current Mailing Address:

4600 WELLS FARGO CENTER
MINNEAPOLIS, MN 55402

New Mailing Address:

FEI Number: 56-2630083

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: MGR () Delete
Name: TPG CREDIT MANAGEMEN, T, L.P.
Address: 4600 WELLS FARGO CENTER, 90 S 7TH ST
City-St-Zip: MINNEAPOLIS, MN 55402

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: DIR () Change (X) Addition
Name: JULIE, BRAUN
Address: 4600 WELLS FARGO CENTER
City-St-Zip: MINNEAPOLIS, MN 55402

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: JULIE K BRAUN

MGR

01/14/2008

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