2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000002854

Address:

City-St-Zip:

Entity Name: VENCORE SOLUTIONS LLC

FILED Jul 15, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4500 SW KRUSE WAY, SUITE 350 LAKE OSWEGO, OR 97035 **Current Mailing Address: New Mailing Address:** 4500 SW KRUSE WAY, SUITE 350 LAKE OSWEGO, OR 97035 FEI Number: 71-0878152 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: ADDITIONS/CHANGES: MGR Title: (X) Change () Addition () Delete SOLE, MARC **NEVILLE, ANDREW** Name: Name: Address: 39TH FIR, TOWER 45 120TH WEST 45TH ST. Address: 3 BETHESDA METRO CENTER City-St-Zip: NEW YORK, NY 10036 City-St-Zip: BETHESDA, MD 20814 Title: MGR Title: () Delete () Change () Addition Name: LADD, ROBB Name: Address: 1000 MEMORIAL DRIVE Address: City-St-Zip: HOUSTON, TX 77024 City-St-Zip: Title: MGR () Delete Title: () Change () Addition GRIGGS, JOHN Name: Name: Address: 1000 MEMORIAL DRIVE Address: City-St-Zip: HOUSTON, TX 77060 City-St-Zip: Title: () Delete Title: MGR () Change (X) Addition LUDWIG, LEONARD Name: Name:

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.

Address:

City-St-Zip:

4500 SW KRUSE WAY STE 350

LAKE OSWEGO, OR 97035

SIGNATURE: LEONARD LUDWIG MGR 07/15/2008