

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000081507

FILED  
Jul 25, 2006  
Secretary of State

Entity Name: COMPUTERX LLC

**Current Principal Place of Business:**

3021 COMMERCIAL WAY  
SUITE 142  
SPRING HILL, FL 34606 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 5122  
SPRING HILL, FL 346115122 US

**New Mailing Address:**

FEI Number: 20-1852554      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:**

MCCLELLAND, ROGER  
3021 COMMERCIAL WAY  
SUITE 142  
SPRING HILL, FL 34606 US

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: MCCLELLAND, ROGER  
Address: 3021 COMMERCIAL WAY  
City-St-Zip: SPRING HILL, FL 34606

Title: MGRM ( ) Delete  
Name: MCCLELLAND, PATRICIA  
Address: 3021 COMMERCIAL WAY  
City-St-Zip: SPRING HILL, FL 34606

**ADDITIONS/CHANGES:**

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 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: ROGER MCCLELLAND

MGRM

07/25/2006

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