2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000012156

FILED
Feb 28, 2006
Secretary of State

Entity Name: OUTSOURCE MANAGEMENT SOLUTIONS, L.L.C.

Current Principal Place of Business:

202 N. MASSACHUSETTS AVE.
LAKELAND, FL 33801

New Principal Place of Business:

Current Mailing Address:

PO BOX 2
LAKELAND, FL 338020002

New Mailing Address:

FEI Number: 59-3751157 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CLEGHORN, ROBERT A
PO BOX 2
LAKELAND, FL 33802 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: CLEGHORN, ROBERT A
Address: PO BOX 2
City-St-Zip: LAKELAND, FL 33802

ADDITIONS/CHANGES:

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: ROBERT A. CLEGHORN MGR 02/28/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date