2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 13, 2005
Secretary of State

DOCUMENT# L01000014012

Entity Name: GO SENSORS LLC

Current Principal Place of Business:

3600 TORREY PINES BLVD
SARASOTA, FL 34238

New Principal Place of Business:

Current Mailing Address:

3600 TORREY PINES BLVD
SARASOTA, FL 34238

New Mailing Address:

46 N. WASHINGTON BLVD.
SUITE 1
SARASOTA, FL 34236

FEI Number: 65-1143975 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LPS CORPORATE SERVICES, INC.
46 N WASHINGTON BLVD
SUITE 1
SARASOTA, FL 34236 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/MEMBERS:

Title:	MGRM	( ) Delete
Name:	PETRIK, GERD	
Address:	3600 TORREY PINES BLVD.	
City-St-Zip:	SARASOTA, FL 34236	
Title:	MGRM	( ) Delete
Name:	ARMSTRONG, BRIAN	
Address:	4107 N. PROSPECT AVE.	
City-St-Zip:	SHOREWOOD, WI 53211	
Title:	MGRM	( ) Delete
Name:	SCHMIDT, KARL	
Address:	2454 N. 96TH STREET	
City-St-Zip:	WAUWATOSA, WI 53226	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 Section 119.07(3)(i), 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: GERD PETRIK MGRM 04/13/2005

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