

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000018053

FILED
Apr 01, 2008
Secretary of State

Entity Name: IDENTIFICATION SERVICES L.L.C.

Current Principal Place of Business:

4028 LOGANS RUN
TALLAHASSEE, FL 32309

New Principal Place of Business:

Current Mailing Address:

4028 LOGANS RUN
TALLAHASSEE, FL 32309

New Mailing Address:

FEI Number: 59-3753751

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MYERS, DEBRA J
4028 LOGANS RUN
TALLAHASSEE, FL 32309 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: CEO () Delete
Name: MYERS, DEBRA J CEO/OWN
Address: 4028 LOGANS RUN
City-St-Zip: TALLAHASSEE, FL 32309

Title: VP () Delete
Name: MYERS, D VP
Address: PO BOX 3811
City-St-Zip: TALLAHASSEE, FL 32315

ADDITIONS/CHANGES:

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

Title: VP (X) Change () Addition
Name: MYERS, D VP
Address: PO BOX 1142
City-St-Zip: MONTICELLO, FL 32345

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: DEBRA J. MYERS

OWNE

04/01/2008

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