

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000022066

FILED  
Jan 14, 2009  
Secretary of State

**Entity Name:** FLORIDA BUSINESS TECHNOLOGIES, LLC

**Current Principal Place of Business:**

631 N. WYMORE RD.  
SUITE 150  
MAITLAND, FL 32751 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 940718  
MAITLAND, FL 327940718

**New Mailing Address:**

**FEI Number:** 26-0000350

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HARDING, ROBERT L ESQ.  
20 NORTH EOLA DR.  
ORLANDO, FL 32801 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: MGRM ( ) Delete  
Name: JAMES, MICHAEL T PRES.  
Address: P.O. BOX 940718  
City-St-Zip: MAITLAND, FL 327940718

Title: MGRM ( ) Delete  
Name: RAMSKI, RUSSELL VP  
Address: P.O. BOX 940718  
City-St-Zip: MAITLAND, FL 327940718

Title: MGRM ( ) Delete  
Name: WALLIN, JANICE H VP  
Address: P.O. BOX 940718  
City-St-Zip: MAITLAND, FL 327940718

Title: MGRM ( ) Delete  
Name: HAECKER, MARK P  
Address: P.O. BOX 940718  
City-St-Zip: MAITLAND, FL 327940718

**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:

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

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: RUSSELL RAMSKI

MGRM

01/14/2009

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