2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 21, 2005
Secretary of State

DOCUMENT# L02000004173

Entity Name: INTEGRATION SYSTEMS LLC

Current Principal Place of Business:

1287 EAST NEWPORT CENTER DRIVE
SUITE 201
DEERFIELD BEACH, FL 33442

New Principal Place of Business:

350 FAIRWAY DRIVE
SUITE 110
DEERFIELD BEACH, FL 33441

Current Mailing Address:

1287 EAST NEWPORT CENTER DRIVE
SUITE 201
DEERFIELD BEACH, FL 33442

New Mailing Address:

350 FAIRWAY DRIVE
SUITE 110
DEERFIELD BEACH, FL 33441

FEI Number: 01-0604567 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BECKEN, DEAN W
5911 NW 122ND DRIVE
CORAL SPRINGS, FL 33076 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: MGR ( ) Delete
Name: KEENE, EARL T MR.
Address: 12646 TORBAY DRIVE
City-St-Zip: BOCA RATON, FL 33428 US

Title: MGR ( ) Delete
Name: BECKEN, DEAN W MR.
Address: 5911 NW 122ND DRIVE
City-St-Zip: CORAL SPRINGS, FL 33076 US

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: KEENE, EARL T MR.
Address: 2608 NE 22ND AVENUE
City-St-Zip: LIGHTHOUSE POINT, FL 33064 US

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: DEAN W BECKEN MGR 03/21/2005

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