## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L02000008553

Address:

City-St-Zip:

329 RANDON TER.

LAKE MARY, FL 32746 US

Entity Name: ALURIA SOFTWARE LLC

FILED Apr 08, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 725 PRIMERA BLVD SUITE 230 LAKE MARY, FL 32746 **Current Mailing Address: New Mailing Address:** 475 MONTGOMERY PL ALTAMONTE SPRINGS, FL 32714 US FEI Number: 74-3042855 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GARRISON, MATTHEW G 900 CAITLIN POINTE LONGWOOD, FL 32750 US 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete GARRISON, MATTHEW G Name: Name: Address: 900 CAITLIN POINTE Address: City-St-Zip: LONGWOOD, FL 32750 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition GARRISON, JAMIE E Name: Name: Address: 900 CAITLIN POINTE Address: City-St-Zip: LONGWOOD, FL 32750 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition KRUSE, JAMES H Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: MATTHREW GARRISON MGRM 04/08/2005