

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000021106

FILED
Jun 05, 2006
Secretary of State

Entity Name: ONSITE COMPUTER SYSTEMS LLC

Current Principal Place of Business:

3512 DEL PRADO BLVD
SUITE 111
CAPE CORAL, FL 33904

New Principal Place of Business:

Current Mailing Address:

3512 DEL PRADO BLVD
SUITE 111
CAPE CORAL, FL 33904

New Mailing Address:

FEI Number: 13-4208500 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MORSE, JUSTIN
3724 S.W. 11TH CT
CAPE CORAL, FL 33914 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/MANAGERS:

Title: MGR () Delete
Name: MORSE, JUSTIN
Address: 3724 S.W. 11TH CT
City-St-Zip: CAPE CORAL, FL 33914

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Name: MORSE, JUSTIN
Address: 3724 S. W. 11TH CT
City-St-Zip: CAPE CORAL, FL 33914

Title: MGR () Delete
Name: MORSE, RYAN
Address: 3724 S.W. 11TH CT
City-St-Zip: CAPE CORAL, FL 33914

Title: MGR () Delete
Name: MORSE, JUSTIN
Address: 3724 S.W. 11TH CT
City-St-Zip: CAPE CORAL, FL 33914

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: MORSE, NANCY
Address: 3724 S.W. 11TH CT
City-St-Zip: CAPE CORAL, FL 33914

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

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

Title: MGR (X) Change () Addition
Name: MORSE, JUSTIN
Address: 3724 S.W. 11TH CT
City-St-Zip: CAPE CORAL, FL 33914

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 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: JUSTIN MORSE

PRES

06/05/2006

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