2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 23, 2007
Secretary of State

DOCUMENT# L03000009427

Entity Name: ADVANTAGE TRANSFER INTERNATIONAL LLC

Current Principal Place of Business:

3195 SEA SHELL WAY
MELBOURNE BEACH, FL 32951

New Principal Place of Business:

Current Mailing Address:

3195 SEA SHELL WAY
MELBOURNE BEACH, FL 32951

New Mailing Address:

FEI Number: 43-2005606 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CANTILLON, WILLIAM H
3195 SEA SHELL WAY
MELBOURNE BEACH, FL 32951 US

Name and Address of New Registered Agent:

CANTILLON, WILLIAM H PRES
3195 SEA SHELL WAY
MELBOURNE BEACH, FL 32951 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: WILLIAM H. CANTILLON 04/23/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: CANTILLON, WILLIAM H
Address: 3195 SEA SHELL WAY
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: MGR (X) Delete
Name: CANTILLON, BONNIE R
Address: 3195 SEA SHELL WAY
City-St-Zip: MELBOURNE BEACH, FL 32951

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: CANTILLON, BONNIE R MGR
Address: 3195 SEA SHELL WAY
City-St-Zip: MELBOURNE BEACH, FL 32951

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: BONNIE R. CANTILLON MGR 04/23/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date