

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000030524

FILED  
Apr 27, 2006  
Secretary of State

Entity Name: SWOT SOLUTIONS, LLC

**Current Principal Place of Business:**

3208-C EAST COLONIAL DRIVE  
#324  
ORLANDO, FL 32803 US

**New Principal Place of Business:**

**Current Mailing Address:**

4332 ASHLAND CTY HWY  
NASHVILLE, TN 37218 US

**New Mailing Address:**

FEI Number: 06-1704388

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

BURDOUCCI, CIEMBRELLI  
5269 WELLINGTON PARK CIRCLE  
SUITE B-24  
ORLANDO, FL 32839 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: CEO ( ) Delete  
Name: BURDOUCCI, ROMELLO  
Address: 5269 WELLINGTON PARK CIRCLE SUITE B-24  
City-St-Zip: ORLANDO, FL 32839 US

Title: VP ( ) Delete  
Name: BYRD, WILLIE M  
Address: 4332 ASHLAND CITY HIGHWAY  
City-St-Zip: NASHVILLE, TN 37218 US

Title: VP ( ) Delete  
Name: BURDOUCCI, CIEMBRELLI  
Address: 5269 WELLINGTON PARK CIRCLE SUITE B-24  
City-St-Zip: ORLANDO, FL 32839 US

**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:

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: WILLIE M BYRD

VP

04/27/2006

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