

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000033434

FILED
Apr 25, 2006
Secretary of State

Entity Name: PRIVACYVIEW SOFTWARE, LLC

Current Principal Place of Business:

19347 WIND DANCER ST.
LUTZ, FL 33558

New Principal Place of Business:

3802 SPECTRUM BOULEVARD
SUITE 127
TAMPA, FL 33612

Current Mailing Address:

19347 WIND DANCER ST.
LUTZ, FL 33558

New Mailing Address:

3802 SPECTRUM BOULEVARD
SUITE 127
TAMPA, FL 33612

FEI Number: 30-0205073

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOODWIN, JAMES W ESQ
201 N. FRANKLIN STREET
SUITE 2000
TAMPA, FL 33602 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: MGR () Delete
Name: GREIF, MARTIN
Address: 19347 WIND DANCER STREET
City-St-Zip: LUTZ, FL 33558

Title: MGR () Delete
Name: TAUSIG, ROGER S
Address: 19347 WIND DANCER STREET
City-St-Zip: LUTZ, FL 33558

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: GREIF, MARTIN
Address: 3802 SPECTRUM BOULEVARD, SUITE 127
City-St-Zip: TAMPA, FL 33612

Title: MGR (X) Change () Addition
Name: TAUSIG, ROGER S
Address: 3802 SPECTRUM BOULEVARD, SUITE 127
City-St-Zip: TAMPA, FL 33612

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: MARTY GREIF

MGR

04/25/2006

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