

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000039965

Entity Name: SHAPES GROUP LTD CO.

FILED
Feb 29, 2008
Secretary of State

Current Principal Place of Business:

1415 FOUNDATION PARK BLVD.
PALM BAY, FL 32909

New Principal Place of Business:

1415 FOUNDATION PARK BLVD. SE
PALM BAY, FL 32909

Current Mailing Address:

1415 FOUNDATION PARK BLVD.
PALM BAY, FL 32909

New Mailing Address:

1415 FOUNDATION PARK BLVD. SE
PALM BAY, FL 32909

FEI Number: 20-0670038

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAHAM, JAMES S CPA
320 FORTENBERRY ROAD
MERRITT ISLAND, FL 32952 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: MGRM () Delete
Name: DATA MANAGEMENT ASSO, CIATES OF BREV A RD, INC
Address: 3225 JORDAN BLVD.
City-St-Zip: MALABAR, FL 32950

Title: MGR () Delete
Name: LARSON, D. JEROME
Address: 3225 JORDAN BLVD.
City-St-Zip: MALABAR, FL 32950

Title: MGR () Delete
Name: LANZA, SANDRA
Address: 3225 JORDAN BLVD.
City-St-Zip: MALABAR, FL 32950

Title: MGR () Delete
Name: ORR, DEBY
Address: 3225 JORDAN BLVD.
City-St-Zip: MALABAR, FL 32950

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:

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

I hereby certify that the information supplied with this filing does not qualify 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: SANDRA LANZA

MGR

02/29/2008

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