

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000041578

Entity Name: VERSIONONE, LLC

FILED  
Jun 07, 2005  
Secretary of State

**Current Principal Place of Business:**

1200 N. FAIRWAY DRIVE  
APOPKA, FL 32712

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 2272  
MERRIFIELD, VA 22116

**New Mailing Address:**

FEI Number: 16-1694075      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:**

NEENAN, RACHAEL  
1200 N. FAIRWAY DRIVE  
APOPKA, FL 32712      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: MGRM      ( ) Delete  
Name: NEENAN, RACHAEL  
Address: 1200 N. FAIRWAY DRIVE  
City-St-Zip: APOPKA, FL 32712

Title: MGRM      ( ) Delete  
Name: NEENAN, REBECCA  
Address: 1200 N. FAIRWAY DRIVE  
City-St-Zip: APOPKA, FL 32712

**ADDITIONS/CHANGES:**

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

Title: MGRM      (X) Change ( ) Addition  
Name: NEENAN, REBECCA  
Address: 1200 N. FAIRWAY DRIVE  
City-St-Zip: APOPKA, FL 32712

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RACHAEL NEENAN

MGRM

06/07/2005

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