

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 14, 2007 08:00 AM
Secretary of State

DOCUMENT # L03000042972



1. Entity Name
DARKSTAR INFORMATION SERVICES COMPANY, LLC

Principal Place of Business
12212 TWIN BRANCH ACRES ROAD
TAMPA, FL 33626

Mailing Address
12212 TWIN BRANCH ACRES ROAD
TAMPA, FL 33626



05112007No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
33-1076295

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

BARNETT, SCOTT F
412 E MADISON ST, #900
TAMPA, FL 33602

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$50.00
Due by September 14, 2007

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
FOUNTAIN, MICHAEL W PH.D.
12212 TWIN BRANCH ACRES ROAD
TAMPA, FL 33626

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
BUDD, STEPHEN R
3551 GRAND FORKS DRIVE
LAND O LAKES, FL 34639

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000000764120
05/30/07-80043-002 50.00

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Stephen R Budd Stephen R Budd 5/11/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #