2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000000077

Entity Name: HELICON SYSTEMS, LLC

FILED Jan 10, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

888 BRUNSWICK LN

ROCKLEDGE, FL 329554023 US

Current Mailing Address: New Mailing Address:

888 BRUNSWICK LN

ROCKLEDGE, FL 329554023 US

FEI Number: 57-1196731 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BAKER, WILLIAM H 888 BRUNSWICK LN ROCKLEDGE, FL 329554023 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

Electronic Signature of Registered Age

ADDITIONS/CHANGES:

Title: CEO () Delete
Name: BAKER, HATTIE J

Address: 888 BRUNSWICK LN

MANAGING MEMBERS/MEMBERS:

City-St-Zip: ROCKLEDGE, FL 329554023 US

Title: COO () Delete Name: BAKER, WILLIAM H

Address: 888 BRUNSWICK LN

City-St-Zip: ROCKLEDGE, FL 329554023 US

Title: CTO () Delete Name: BAKER, THOMAS L

Address: 655 WEST IRVING PARK ROAD, APPT. 4801

City-St-Zip: CHICAGO, IL 60613 US

Title: MGR (X) Change () Addition Name: BAKER, HATTIE J

Address: 888 BRUNSWICK LN

City-St-Zip: ROCKLEDGE, FL 329554023 US

Title: MGR (X) Change () Addition

Name: BAKER, WILLIAM H Address: 888 BRUNSWICK LN

City-St-Zip: ROCKLEDGE, FL 329554023 US

Title: MGR (X) Change () Addition

Name: BAKER, THOMAS L

Address: 935 WEST LELAND DRIVE, UNIT 1E

City-St-Zip: CHICAGO, IL 60640 US

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: WILLIAM H. BAKER MGR 01/10/2005