

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000002354

FILED  
Apr 12, 2006  
Secretary of State

**Entity Name:** SECURE INFORMATION SYSTEMS TECHNOLOGY MANAGEMENT, LLC

**Current Principal Place of Business:**

5316 SE 122ND STREET  
STARKE, FL 32091

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 378  
LAWTEY, FL 32058

**New Mailing Address:**

**FEI Number:** 20-0526011

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CARNEY, DOUG  
5316 SE 122ND STREET  
STARKE, FL 32091 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: CARNEY, DOUG  
Address: 5316 SE 122ND STREET  
City-St-Zip: STARKE, FL 32091

Title: MGRM ( ) Delete  
Name: KING, MARK  
Address: 1469 NW 251ST STREET  
City-St-Zip: LAWTEY, FL 32058

Title: MGRM ( ) Delete  
Name: KEENE, MARK  
Address: 1492 S. PLAINVIEW DRIVE  
City-St-Zip: COPLEY, OH 44321

**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:

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: DOUG CARNEY

MGRM

04/12/2006

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