

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000002608

FILED  
Apr 24, 2007  
Secretary of State

Entity Name: AUTOMATED MAILING, LLC

**Current Principal Place of Business:**

3625 W. CYPRESS ST  
TAMPA, FL 33607 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 320307  
TAMPA, FL 33679 US

**New Mailing Address:**

FEI Number: 56-2427145

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BONIN, DONALD  
16705 EAGLE OAK DR  
ODESSA, FL 33556 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: MGR ( ) Delete  
Name: BONIN, DONALD  
Address: 16705 EAGLE OAK DR  
City-St-Zip: ODESSA, FL 33556

Title: MGR ( ) Delete  
Name: MILJUS, ROBB  
Address: 5308 WITHAM CT  
City-St-Zip: TAMPA, FL 33647

**ADDITIONS/CHANGES:**

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: DONALD BONIN

MGR

04/24/2007

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