

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000020506

FILED
Apr 28, 2005
Secretary of State

Entity Name: ONSITE COMPUTER SOLUTIONS OF FLORIDA, LLC

Current Principal Place of Business:

PO BOX 1565
GOLDENROD, FL 32733

New Principal Place of Business:

Current Mailing Address:

PO BOX 1565
GOLDENROD, FL 32733

New Mailing Address:

FEI Number: 20-0900624

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KLEINBERGER, STEVEN M
1411 EL CAJON COURT
WINTER SPRINGS, FL 32708 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/MEMBERS:

Title: MGRM () Delete
Name: BERARDI, ROBERT
Address: 16012 LANESBORO COURT
City-St-Zip: CLERMONT, FL 34711

Title: MGRM () Delete
Name: VALDES-PAGES, JAIME
Address: 1635 BOMI CIRCLE
City-St-Zip: WINTER PARK, FL 32733

Title: MGRM () Delete
Name: SPITERI, ROBERT
Address: 13731 SUNSHOWERS CIRCLE
City-St-Zip: ORLANDO, FL 32828

Title: MGRM (X) Delete
Name: ZINIEWICZ, ADAM
Address: 32426 WOLFBRANCH LANE
City-St-Zip: SORRENTO, FL 32776

Title: MGRM (X) Delete
Name: GUBERA, KENNETH
Address: 916 SENECA FALLS DRIVE
City-St-Zip: ORLANDO, FL 32828

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: VALDES-PAGES, JAIME
Address: 1635 BOMI CIRCLE
City-St-Zip: WINTER PARK, FL 32733

Title: MGRM (X) Change () Addition
Name: ZINIEWICZ, ADAM
Address: 32426 WOLFBRANCH LANE
City-St-Zip: SORRENTO, FL 32776

Title: MGRM (X) Change () Addition
Name: BERARDI, ROBERT
Address: 16012 LANESBORO COURT
City-St-Zip: CLERMONT, FL 34711

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 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: JAIME VALDES-PAGES

MGRM

04/28/2005

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