

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000049154

Entity Name: SPECTROM LLC

FILED  
Apr 26, 2008  
Secretary of State

**Current Principal Place of Business:**

3926 COUNTRY PLACE  
WINTER HAVEN, FL 33880

**New Principal Place of Business:**

**Current Mailing Address:**

3926 COUNTRY PLACE  
WINTER HAVEN, FL 33880

**New Mailing Address:**

FEI Number: 06-1729870

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PARRISH, MARY M  
3926 COUNTRY PLACE  
WINTER HAVEN, FL 33880 US

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

BROWN, SAMUEL A  
3926 COUNTRY PLACE  
WINTER HAVEN, FL 33880 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: SAMUEL A BROWN

04/26/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: PARRISH, MARY M  
Address: 3926 COUNTRY PLACE  
City-St-Zip: WINTER HAVEN, FL 33880

Title: MGRM (X) Delete  
Name: BROWN, SAMUEL A  
Address: 3926 COUNTRY PLACE  
City-St-Zip: WINTER HAVEN, FL 33880

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: BROWN, SAMUEL A  
Address: 3929 COUNTRY PLACE  
City-St-Zip: WINTER HAVEN, FL 33880

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: SAMUEL A BROWN

MGRM

04/26/2008

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