2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 11, 2008
Secretary of State

DOCUMENT# L04000053803

Entity Name: SGC COMPUTER FORENSICS, LLC

Current Principal Place of Business:

11304 BLACKBARK DRIVE
RIVERVIEW, FL 33569

New Principal Place of Business:

11304 BLACKBARK DRIVE
RIVERVIEW, FL 33579

Current Mailing Address:

11304 BLACKBARK DRIVE
RIVERVIEW, FL 33569

New Mailing Address:

11304 BLACKBARK DRIVE
RIVERVIEW, FL 33579

FEI Number: 20-1401524 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LUALLEN, SHERRI G
11304 BLACKBARK DR
RIVERVIEW, FL 33569 US

Name and Address of New Registered Agent:

LUALLEN, SHERRI G
11304 BLACKBARK DR
RIVERVIEW, FL 33579 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: 04/11/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: LUALLEN, SHERRI G
Address: 11304 BLACKBARK DR
City-St-Zip: RIVERVIEW, FL 33569

Title: MGRM ( ) Delete
Name: LUALLEN, CRAIG F
Address: 11304 BLACKBARK DR
City-St-Zip: RIVERVIEW, FL 33569

Title: MGRM (X) Delete
Name: NELSON, GEORGE D
Address: 3003 SUMMER HOUSE DR
City-St-Zip: VALRICO, FL 33594

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: LUALLEN, SHERRI G
Address: 11304 BLACKBARK DR
City-St-Zip: RIVERVIEW, FL 33579

Title: MGRM (X) Change ( ) Addition
Name: LUALLEN, CRAIG F
Address: 11304 BLACKBARK DR
City-St-Zip: RIVERVIEW, FL 33579

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: CRAIG LUALLEN MGRM 04/11/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date