

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 11, 2007 8:00 am
Secretary of State

01-11-2007 90128 014 ****50.00

DOCUMENT # L04000062061

1. Entity Name
QUANTIFIED PURCHASING RESOURCES, LLC



Principal Place of Business
**300 INTERNATIONAL PARKWAY, STE. 100
HEATHROW, FL 32746**

Mailing Address
**25527 HAWKS RUN LANE
SORRENTO, FL 32776**

DO NOT WRITE IN THIS SPACE

01052007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
20-1524022

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**JOHNSON, SCOTT E ESQ
111 N. ORANGE AVE, STE. 1200
ORLANDO, FL 32801**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE	MM
NAME	KINTSLER, JOHN <i>KINTZLER</i>
STREET ADDRESS	25527 HAWKS RUN LANE
CITY-ST-ZIP	SORRENTO, FL 32776

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: *[Signature]* *Managing Director*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

1/5/07 352-385-0552