2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 19, 2007
Secretary of State

DOCUMENT# L05000007011

Entity Name: C-CURE NETWORK SERVICES LLC

Current Principal Place of Business:

5103 SOUTH SHERIDAN RD.
SUITE 223
TULSA, OK 74145

New Principal Place of Business:

Current Mailing Address:

5103 SOUTH SHERIDAN RD.
SUITE 223
TULSA, OK 74145

New Mailing Address:

FEI Number: 34-2032272 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

GIOVELLI, NICK
955-A EAST ALTAMONTE DRIVE
ALTAMONTE SPRINGS, FL 32701 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: MGRM ( ) Delete
Name: BROSKY, BRENDAN
Address: 4330 S 440
City-St-Zip: PRYOR, OK 74361

Title: MGRM ( ) Delete
Name: BROSKY, MARYBETH
Address: 4330 S 440
City-St-Zip: PRYOR, OK 74361

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

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

Title: MGR ( ) Change (X) Addition
Name: STONER, RUSSELL C
Address: 19777 MOUNTAIN LANE
City-St-Zip: CLAREMORE, OK 74109

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: BRENDAN BROSKY MGRM 07/19/2007

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