2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000015482

FILED Jan 23, 2007 Secretary of State

Entity Name: INVESTMENT MANAGEMENT SOLUTIONS LIMITED LIABILTY COMPANY

Current Principal Place of Business: New Principal Place of Business:

3216 CORRINE DR 407 LAKE HOWELL RD ORLANDO, FL 32803

SUITE 108

MAITLAND, FL 32751

Current Mailing Address: New Mailing Address:

5840 RED BUG LK RD. STE. 295 5840 RED BUG LK RD.

WINTER SPRINGS, FL 32708 SUITE 295

WINTER SPRINGS, FL 32708

FEI Number: 71-0977652 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

QUINLAN, SCOTT C QUINLAN, SCOTT C 407 LAKE HOWELL RD 7347 WINDING LAKE CIRCLE

OVIEDO, FL 32765 SUITE 108 MAITLAND, FL 32751 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: 01/23/2007

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: () Delete (X) Change () Addition QUINLAN, SCOTT C Name: QUINLAN, SCOTT C Name:

5840 RED BUG LK RD. STE. 295 Address: 407 LAKE HOWELL RD., SUITE 108 Address: WINTER SPRINGS, FL 32708 MAITLAND, FL 32751

City-St-Zip: City-St-Zip:

Title: MGRM (X) Delete Title: () Change () Addition Name:

QUINLAN, GERTUDIS Name: Address: 5840 RED BUG LK RD. STE. 295 Address: City-St-Zip: WINTER SPRINGS, FL 32708 City-St-Zip:

Title: MGRM () Delete Title: MGRM (X) Change () Addition QUINLAN, TIMOTHY J QUINLAN, TIMOTHY J Name: Name:

5840 RED BUG LK RD. STE. 295 407 LAKE HOWELL RD., SUITE 108 Address: Address:

City-St-Zip: WINTER SPRINGS, FL 32708 City-St-Zip: MAITLAND, FL 32751

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: Name:

PHILIP, BROWN A PHILIP, BROWN A 5840 RED BUG LK RD. STE. 295 407 LAKE HOWELL RD., SUITE 108 Address: Address:

City-St-Zip: WINTER SPRINGS, FL 32708 City-St-Zip: MAITLAND, FL 32751

I hereby certify that the information supplied with this filing does not qualify for the 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: SCOTT C. QUINLAN 01/23/2007