2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 27, 2006
Secretary of State

DOCUMENT# L05000036051

Entity Name: VIRTUAL SOLUTIONS LLC

Current Principal Place of Business:

1420 CALLOWAY ST
TALLAHASSEE, FL 32304

New Principal Place of Business:

Current Mailing Address:

3102 DIAN RD
TALLAHASSEE, FL 32304

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HEAD, JEFFORY E
1420 CALLOWAY ST
TALLAHASSEE, FL 32304 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: WILLIAMS, EARL
Address: 3102 DIAN RD
City-St-Zip: TALLAHASSEE, FL 32304

Title: MGRM ( ) Delete
Name: HEAD, JEFFORY
Address: 1420 CALLOWAY ST
City-St-Zip: TALLAHASSEE, FL 32304

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: WILLIAMS, EARL
Address: 2417 GOTHIC DR
City-St-Zip: TALLAHASSEE, FL 32303

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

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: EARL WILLIAMS MGRM 04/27/2006

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