

**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
May 31, 2006  
Secretary of State**

DOCUMENT# L05000051757

Entity Name: EXCEPTING SOLUTION LLC

**Current Principal Place of Business:**

691 ASHFORD OAKS DR  
103  
ALTAMONTE SPRINGS, FL 32714 US

**New Principal Place of Business:**

**Current Mailing Address:**

691 ASHFORD OAKS DR  
103  
ALTAMONTE SPRINGS, FL 32714 US

**New Mailing Address:**

FEI Number: 33-1120485      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:**

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

PETITHOMME, JOAS  
691 ASHFORD OAKS DR  
103  
ALTAMONTE SPRINGS, FL 32714 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: PETITHOMME, JOAS  
Address: 691 ASHFORD OAKS DR  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

**ADDITIONS/CHANGES:**

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: JOAS PETITHOMME

MGRM

05/31/2006

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