2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 15, 2008
Secretary of State

DOCUMENT# L05000066047

Entity Name: FSI, LLC

Current Principal Place of Business:

23781 HWY 27 # 307
LAKE WALES, FL 33859

New Principal Place of Business:

2270 GRIFFIN ROAD # 202
LAKELAND, FL 33810

Current Mailing Address:

23781 HWY 27 # 307
LAKE WALES, FL 33859

New Mailing Address:

2270 GRIFFIN ROAD # 202
LAKELAND, FL 33810

FEI Number: 20-3177615 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CRAMER, CHARLES W
1411 EDGEWATER DRIVE
SUITE 200
ORLANDO, FL 32804 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: PRES ( ) Delete
Name: ESTERLINE, DANIEL
Address: 731 JAMESTOWN DRIVE
City-St-Zip: WINTER PARK, FL 32792

Title: VP ( ) Delete
Name: MAHAFFEY, WILLIAM
Address: 731 JAMESTOWN DRIVE
City-St-Zip: WINTER PARK, FL 32792

Title: SECY ( ) Delete
Name: HUMPHERY, JAMES
Address: 731 JAMESTOWN DRIVE
City-St-Zip: WINTER PARK, FL 32792

ADDITIONS/CHANGES:

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

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

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

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: DANIEL ESTERLINE PRES 02/15/2008

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