

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000072132

FILED
May 01, 2007
Secretary of State

Entity Name: VOICEPOWERED SOLUTIONS LLC

Current Principal Place of Business:

4025 TAMPA ROAD
SUITE 1104
OLDSMAR, FL 34677

New Principal Place of Business:

Current Mailing Address:

4025 TAMPA ROAD
SUITE 1104
OLDSMAR, FL 34677

New Mailing Address:

FEI Number: 25-1921371 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:

GOODELL, BRYAN E
8610 CHADWICK DRIVE
TAMPA, FL 33635 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: GOODELL, BRYAN E
Address: 8610 CHADWICK DRIVE
City-St-Zip: TAMPA, FL 33635

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

ADDITIONS/CHANGES:

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

Title: MGR () Change (X) Addition
Name: CHAVARIE, TYSON H
Address: 9890 MONTAGUE STREET
City-St-Zip: TAMPA, FL 33626

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: BRYAN E GOODELL

MGRM

05/01/2007

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