2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000072132

Entity Name: VOICEPOWERED SOLUTIONS LLC

FILED Jan 11, 2008 Secretary of State

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

4025 TAMPA ROAD 5519 W. HILLSBOROUGH AVE.

SUITE 1104 TAMPA, FL 33634 OLDSMAR, FL 34677

Current Mailing Address: New Mailing Address:

4025 TAMPA ROAD 5519 W. HILLSBOROUGH AVE.

SUITE 1104 TAMPA, FL 33634 OLDSMAR, FL 34677

FEI Number: 25-1921371 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:

GOODELL, BRYAN E GOODELL, BRYAN E 8610 CHADWICK DRIVE 8139 HONEYBEE LANE TAMPA, FL 33635 US TAMPA, FL 33635 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: 01/11/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

 Name:
 GOODELL, BRYAN E
 Name:
 GOODELL, BRYAN E

 Address:
 8610 CHADWICK DRIVE
 Address:
 8139 HONEYBEE LANE

 City-St-Zip:
 TAMPA, FL 33635
 City-St-Zip:
 TAMPA, FL 33635

Title: MGR () Delete Title: () Change () Addition

 Name:
 CHAVARIE, TYSON H
 Name:

 Address:
 9890 MONTAGUE STREET
 Address:

 City-St-Zip:
 TAMPA, FL 33626
 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: BRYAN E GOODELL PRES 01/11/2008