

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000083080

FILED
May 01, 2008
Secretary of State

Entity Name: INSTRUMENTATION SPECIALISTS, LLC

Current Principal Place of Business:

5219 CHISWICK CIRCLE
ORLANDO, FL 32812 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 2508
GOLDENROD, FL 327332508 US

New Mailing Address:

P. O. BOX 637
SANBORN, NY 14132 US

FEI Number: 20-3357124 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:

CHANDLER, JAMES J
5219 CHISWICK CIRCLE
ORLANDO, FL 32812 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: CHANDLER, JAMES J
Address: P. O. BOX 2508
City-St-Zip: GOLDENROD, FL 327332508 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CHANDLER, JAMES J
Address: P. O. BOX 637
City-St-Zip: SANBORN, FL 14132 US

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: JAMES CHANDLER

MGRM

05/01/2008

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