

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000007179

Entity Name: EVOKE TECHNOLOGY LLC

FILED
Jul 09, 2007
Secretary of State

Current Principal Place of Business:

PO BOX 1798
TALLEVAST, FL 34270 US

New Principal Place of Business:

1405 RACIMO DR
SARASOTA, FL 34240 US

Current Mailing Address:

PO BOX 1798
TALLEVAST, FL 34270 US

New Mailing Address:

PO BOX 1789
TALLEVAST, FL 34270 US

FEI Number: 51-0564898 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:

DICKEY, AARON S
1405 RACIMO DR
SARASOTA, FL 34240 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: DICKEY, AARON S
Address: 1405 RACIMO DRIVE
City-St-Zip: SARASOTA, FL 34240 US

Title: MGRM () Delete
Name: EGLE, LAWRENCE E
Address: 7305 OAK RUN LANE
City-St-Zip: SARASOTA, FL 34243 US

ADDITIONS/CHANGES:

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: AARON DICKEY

MR

07/09/2007

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