# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Jul 14, 2008**
**Secretary of State**

DOCUMENT# L06000038673

**Entity Name:** DIGITAL TRANSCRIPTION SOLUTIONS, LLC

**Current Principal Place of Business:**

5401 S. KIRKMAN RD
SUITE 310
ORLANDO, FL 32819 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 395
OAKLAND, FL 34760

**New Mailing Address:**

**FEI Number: 83-0454157** **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:**

DELATTRE, KELLY
716 LARGOVISTA DRIVE
OAKLAND, FL 34760 US

**Name and Address of New Registered Agent:**

DELATTRE, KELLY
716 LARGOVISTA DRIVE
OAKLAND, FL 34787 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: _____ 07/14/2008
Electronic Signature of Registered Agent — Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete
Name: DELATTRE, KELLY
Address: 716 LARGOVISTA DRIVE
City-St-Zip: OAKLAND, FL 34787

**ADDITIONS/CHANGES:**

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: KELLY DELATTRE MGRM 07/14/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date