

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000043520

Entity Name: NOBLE DATA SYSTEMS LLC

FILED  
Apr 26, 2007  
Secretary of State

**Current Principal Place of Business:**

146 GIRALDA BLVD NE  
SAINT PETERSBURG, FL 33704 US

**New Principal Place of Business:**

**Current Mailing Address:**

146 GIRALDA BLVD NE  
SAINT PETERSBURG, FL 33704 US

**New Mailing Address:**

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DATA MASTERING ONLINE INC  
146 GIRALDA BLVD NE  
SAINT PETERSBURG, FL 33704 US

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

DANO, KERRY M  
146 GIRALDA BLVD NE  
SAINT PETERSBURG, FL 33704 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: KERRY M DANO

04/26/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: DATA MASTERING ONLIN, E INC  
Address: 146 GIRALDA BLVD NE  
City-St-Zip: SAINT PETERSBURG, FL 33704 US

Title: MGR (X) Delete  
Name: PRESCIENT TECHNOLOGI, ES INC  
Address: 3 GOLD POST ROAD  
City-St-Zip: DOVER, NH 03820 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: DANO, KERRY M  
Address: 146 GIRALDA BLVD NE  
City-St-Zip: SAINT PETERSBURG, FL 33704 US

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: KERRY M DANO

MGR

04/26/2007

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