## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L06000075196

City-St-Zip:

Entity Name: ASTUTANT LEESBURG, LLC

FILED Feb 26, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1430 ROYAL PALM SQUARE BOULEVARD 1035 WEST DIXIE AVE LEESBURG, FL 34748 US SUITE 103 FORT MYERS, FL 33919 **New Mailing Address: Current Mailing Address:** 1430 ROYAL PALM SQUARE BOULEVARD 1035 WEST DIXIE AVE SUITE 103 LEESBURG, FL 34748 US FORT MYERS, FL 33919 FEI Number: 20-5288749 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: PARAMESWARAN, ARUN PODUVAL, ABHISHEK 1035 WEST DIXIE AVE 1430 ROYAL PALM SQUARE BOULEVARD LEESBURG, FL 34748 US SUITE 103 FORT MYERS, FL 33919 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: ABHISHEK PODUVAL 02/26/2008 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete PARAMESWARAN, ARUN Name: Name: 1430 ROYAL PALM SQUARE BOULEVARD, # 103 Address: Address: City-St-Zip: FORT MYERS, FL 33919 US City-St-Zip: Title: Title: MGRM ( ) Delete ( ) Change (X) Addition Name: Name: HARITH, RAM Address: Address: 3151 ANTICA STREET City-St-Zip: City-St-Zip: FORTMYERS, FL 33905 Title: () Delete Title: MGRM ( ) Change (X) Addition PODUVAL, ABHISHEK Name: Name: 1035 WEST DIXIE AVE Address: Address: City-St-Zip: City-St-Zip: LEESBURG, FL 34748 Title: () Delete Title: MGRM ( ) Change (X) Addition Name: Name: PARAMESWARAN, RAMAA 1430 ROYAL PALM SQUARE BOULEVARD, # 103 Address: Address: City-St-Zip: City-St-Zip: FORT MYERS, FL 33919 Title: () Delete Title: MGRM ( ) Change (X) Addition RAMACHANDRAN, RANJITH K Name: Name: 1035 WEST DIXIE AVE Address: Address:

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.

City-St-Zip:

LEESBURG, FL 34748

SIGNATURE: ABHISHEK PODUVAL MGRM 02/26/2008