

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000077327

Entity Name: EDEBTSOLUTIONS, LLC

FILED
Jan 04, 2007
Secretary of State

Current Principal Place of Business:

4135 WHITTNER DRIVE
LAND O LAKES, FL 34639

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 341499
TAMPA, FL 33694

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COOPER, SANDRA
4135 WHITTNER DRIVE
LAND O LAKES, FL 34639 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: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: T/S () Change (X) Addition
Name: ACKERMAN, JOEL
Address: 4135 WHITTNER DRIVE
City-St-Zip: LAND O LAKES, FL 34639

I hereby certify that the information supplied with this filing does not qualify for the 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: JOEL ACKERMAN

T/S

01/04/2007

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