2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000079223

Entity Name: ONE SOLUTION, LLC

371 REED AVE NW

N CANTON, OH 44720 US

Address:

City-St-Zip:

FILED Jan 04, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 928 LAKESHORE DRIVE POLK CITY, FL 33868 **Current Mailing Address: New Mailing Address:** 928 LAKESHORE DRIVE POLK CITY, FL 33868 US FEI Number: 20-5457068 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: HUTTO, KENNETH 1203 LÓNGWOOD OAKS BLVD LAKELAND, FL 33811 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete SUMNER, FRED Name: Name: 928 LAKESHORE DRIVE Address: Address: City-St-Zip: POLK CITY, FL 33868 US City-St-Zip: Title: MGRM Title: () Delete () Change () Addition Name: TUCKER, JIM Name: Address: 7550 LAKE COVE DRIVE Address: City-St-Zip: MERIDIAN, MS 39305 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition DAVISON, GARY Name: Name: 245 GRANDE CYPRESS Address: Address: City-St-Zip: MERIDIAN, MS 39305 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: GLATON, SCOTT Name: 5 SOUTH BROAD STREET Address: Address: City-St-Zip: METTER, GA 30439 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition TUCKER, MATT Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: FRED SUMNER PRES 01/04/2007