## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L06000084566

Entity Name: DATA SECURITIES, LLC

City-St-Zip:

ORLANDO, FL 32835

FILED Mar 15, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1488 SEMINOLA BLVD. CASSELBERRY, FL 32707 **Current Mailing Address: New Mailing Address:** 1488 SEMINOLA BLVD. CASSELBERRY, FL 32707 FEI Number: 20-5487489 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: A1A REGISTERED AGENT INC. 92 SADBERRY ROAD QUINCY, FL 32351 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: ( ) Delete MGRM Title: () Change () Addition HERRMANN, CARRIE Name: Name: Address: 4389 CAINS WREN TRAIL Address: City-St-Zip: SANFORD, FL 32771 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: STOUFFER, TREY Name: Address: 688 BROADOAK LOOP Address: City-St-Zip: SANFORD, FL 32771 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition BROADERICK, JASON Name: Name: Address: 2301 LAKE DEBRA DRIVE, #123 Address:

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.

City-St-Zip:

SIGNATURE: CARRIE HERRMANN MGRM 03/15/2007