2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 20, 2008
Secretary of State

DOCUMENT# L06000107207

Entity Name: THE OFFICE ASSOCIATE, LLC

Current Principal Place of Business:

109 BREEZEWOOD DRIVE
DEBARY, FL 32713

New Principal Place of Business:

640 DOLPHIN COVE COURT
DEBARY, FL 32713

Current Mailing Address:

109 BREEZEWOOD DRIVE
DEBARY, FL 32713

New Mailing Address:

640 DOLPHIN COVE COURT
DEBARY, FL 32713

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JONES, ROBERT G
109 BREEZEWOOD DRIVE
DEBARY, FL 32713 US

Name and Address of New Registered Agent:

JONES, ROBERT G
640 DOLPHIN COVE COURT
DEBARY, FL 32713 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: 04/20/2008
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: JONES, BOB
Address: 109 BREEZEWOOD DRIVE
City-St-Zip: DEBARY, FL 32713

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: JONES, BOB
Address: 640 DOLPHIN COVE COURT
City-St-Zip: DEBARY, FL 32713

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: BOB JONES PRES 04/20/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date