

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000107294

FILED
Mar 15, 2008
Secretary of State

Entity Name: MEDIATION SPECIALISTS, LLC

Current Principal Place of Business:

6619 THOROUGHbred LOOP
ODESSA, FL 33556 US

New Principal Place of Business:

Current Mailing Address:

6619 THOROUGHbred LOOP
ODESSA, FL 33556 US

New Mailing Address:

FEI Number: 76-0850475

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BIKOWITZ, M LYNN P
6619 THOROUGHbred LOOP
ODESSA, FL 33556 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: MGR () Delete
Name: BIKOWITZ, M LYNN P
Address: 6619 THOROUGHbred LOOP
City-St-Zip: ODESSA, FL 33556 US

ADDITIONS/CHANGES:

Title: MM (X) Change () Addition
Name: BIKOWITZ, M LYNN P
Address: 6619 THOROUGHbred LOOP
City-St-Zip: ODESSA, FL 33556 US

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: M. LYNN POPE BIKOWITZ

MM

03/15/2008

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