

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000107990

FILED
Aug 13, 2007
Secretary of State

Entity Name: LOYAL SOURCE PROFESSIONAL SERVICES LLC

Current Principal Place of Business:

13000 AVALON LAKE DR
SUITE 208
ORLANDO, FL 32828 US

New Principal Place of Business:

Current Mailing Address:

13000 AVALON LAKE DR
SUITE 208
ORLANDO, FL 32828 US

New Mailing Address:

FEI Number: 32-0185920 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MOORE, AMY M
2406 FLOWERING DOGWOOD DR
ORLANDO, FL 32828 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MOORE, AMY M
Address: 2406 FLOWERING DOGWOOD DR
City-St-Zip: ORLANDO, FL 32828 US

Title: MGR () Delete
Name: MOORE, BRIAN F
Address: 2406 FLOWERING DOGWOOD DR
City-St-Zip: ORLANDO, FL 32828 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: AMY M. MOORE

MGR

08/13/2007

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