

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000112460

Entity Name: ECG ON THE NET, LLC

FILED
Sep 09, 2008
Secretary of State

Current Principal Place of Business:

610 CRESCENT EXECUTIVE CT.
SUITE 300
LAKE MARY, FL 32746

Current Mailing Address:

610 CRESCENT EXECUTIVE CT.
SUITE 300
LAKE MARY, FL 32746

New Principal Place of Business:

801 INTERNATIONAL PKY
5TH FLOOR
LAKE MARY, FL 32746

New Mailing Address:

801 INTERNATIONAL PKY
5TH FLOOR
LAKE MARY, FL 32746

FEI Number: 20-5867962 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:

SCHAFTLEIN, MARK
610 CRESCENT EXECUTIVE CT.
SUITE 300
LAKE MARY, FL 32746 US

Name and Address of New Registered Agent:

SCHAFTLEIN, MARK
801 INTERNATIONAL PKY
5TH FLOOR
LAKE MARY, FL 32746 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:

09/09/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: EPICUS COMMUNICATION, S GROUP, INC.
Address: 1750 OSCEOLA DRIVE
City-St-Zip: WEST PALM BEACH, FL 33409

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: EPICUS COMMUNICATION, S GROUP, INC.
Address: 801 INTERNATIONAL PKY
City-St-Zip: LAKE MARY, FL 32746

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: MARK SCHAFTLEIN

MGRM

09/09/2008

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