

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000116842

**FILED**  
**Feb 16, 2011**  
**Secretary of State**

**Entity Name:** HARVEST SOFTWARE SOLUTIONS, LLC

**Current Principal Place of Business:**

9471 BAYMEADOWS ROAD  
SUITE # 402  
JACKSONVILLE, FL 32256

**New Principal Place of Business:**

**Current Mailing Address:**

9471 BAYMEADOWS ROAD  
SUITE # 402  
JACKSONVILLE, FL 32256

**New Mailing Address:**

**FEI Number:** 84-1648732

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

CHAMBERLAIN, JOEL CPA  
2950 HALCYON LN  
STE 606  
JACKSONVILLE, FL 32223 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:** MGRM  
**Name:** BANDARU, SRI RAVI K  
**Address:** 8064 TIMBERMILL ROAD  
**City-St-Zip:** JACKSONVILLE, FL 32256

**Title:** MGRM  
**Name:** PAILA, SAI SAILAJA V  
**Address:** 8064 TIMBERMILL ROAD  
**City-St-Zip:** JACKSONVILLE, FL 32256

I hereby 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:** SRI RAVI K BANDARU

MGRM

02/16/2011

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