

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000118791

Entity Name: ATO DOC PREP, LLC

FILED
Jul 16, 2007
Secretary of State

Current Principal Place of Business:

601 BAYSHORE BLVD
SUITE 850
TAMPA, FL 33606

New Principal Place of Business:

Current Mailing Address:

601 BAYSHORE BLVD
SUITE 850
TAMPA, FL 33606

New Mailing Address:

FEI Number: FEI Number Applied For (X) 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:

CONSULT ONE, LLC
8950 MARTIN LUTHER KING N
SUITE 130
ST. PETERSBURG, FL 33702 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: FERNANDEZ, ALEC C
Address: 601 BAYSHORE BLVD, SUITE 850
City-St-Zip: TAMPA, FL 33606

Title: MG () Delete
Name: OLIVER, ORLICKI
Address: 601 BAYSHORE BLVD, SUITE 850
City-St-Zip: TAMPA, FL 33606

Title: MGRM () Delete
Name: THOMAS, ROCHA
Address: 601 BAYSHORE BLVD, SUITE 850
City-St-Zip: TAMPA, FL 33606

ADDITIONS/CHANGES:

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

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: ALEC FERNANDEZ

MGRM

07/16/2007

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