

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000120007

Entity Name: EMC EXPOS, LLC

FILED
Jan 23, 2007
Secretary of State

Current Principal Place of Business:

350 SAN JUAN DRIVE
PONTE VEDRA BEACH, FL 32082 US

New Principal Place of Business:

4745 SUTTON PARK COURT
SUITE 303
JACKSONVILLE, FL 32224 US

Current Mailing Address:

350 SAN JUAN DRIVE
PONTE VEDRA BEACH, FL 32082 US

New Mailing Address:

4745 SUTTON PARK COURT
SUITE 303
JACKSONVILLE, FL 32224 US

FEI Number: 20-8055447

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRAWFORD, JOHN R
1200 RIVERPLACE BOULEVARD
SUITE 800
JACKSONVILLE, FL 32207 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: CHONG, KYLE
Address: 51 36TH AVENUE SOUTH
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: MGR (X) Delete
Name: LEWIS, BRANDON
Address: 350 SAN JUAN DRIVE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: LEWIS & CLARK GROUP, LLC
Address: 4745 SUTTON PARK COURT
City-St-Zip: JACKSONVILLE, FL 32224

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

I hereby certify that the information supplied with this filing does not qualify for the 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: LEWIS & CLARK GROUP LLC

MGR

01/23/2007

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