

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000042906

FILED  
Mar 09, 2009  
Secretary of State

Entity Name: FLORIDA INFORMATION CONSORTIUM, LLC

**Current Principal Place of Business:**

25501 W VALLEY PARKWAY  
SUITE 300  
OLATHE, KS 66061

**New Principal Place of Business:**

**Current Mailing Address:**

25501 W VALLEY PARKWAY  
SUITE 300  
OLATHE, KS 66061

**New Mailing Address:**

FEI Number: 58-2571158

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CT CORPORATION SYSTEM  
1200 S PINE ISLAND ROAD  
PLANTATION, FL 33324 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 ( ) Delete  
Name: BRADLEY, WILLIAM F JR  
Address: 10540 S RIDGEVIEW RD  
City-St-Zip: OLATHE, KS 66061

Title: MGRM ( ) Delete  
Name: HERINGTON, HARRY H  
Address: 10540 S RIDGEVIEW RD  
City-St-Zip: OLATHE, KS 66061

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: BRADLEY, WILLIAM F JR  
Address: 25501 W VALLEY PARKWAY, SUITE 300  
City-St-Zip: OLATHE, KS 66061

Title: MGRM (X) Change ( ) Addition  
Name: HERINGTON, HARRY H  
Address: 25501 W VALLEY PARKWAY, SUITE 300  
City-St-Zip: OLATHE, KS 66061

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: WILLIAM F. BRADLEY JR.

MGRM

03/09/2009

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