2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000075331

Entity Name: CERTIFIED NETWORK ASSOCIATES, L.L.C.

FILED Feb 21, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

424 EAST CENTRAL BOULEVARD 314

ORLANDO, FL 32801 US

Current Mailing Address: New Mailing Address:

424 EAST CENTRAL BOULEVARD #314 ORLANDO, FL 32801 US

FEI Number: 26-0597645 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GUEST, ROBERT K JR

8824 VILLA VIEW CIRCLE

APT 207

ORLANDO, FL 32821 US

GUEST, ROBERT K JR

229 AMIDON LANE

ORLANDO, FL 32809 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: ROBERT K GUEST, JR. 02/21/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

 Name:
 GUEST, ROBERT K JR
 Name:
 GUEST, ROBERT K JR

 Address:
 8824 VILLA VIEW CIRCLE, APT 207
 Address:
 229 AMIDON LANE

 City-St-Zip:
 ORLANDO, FL 32821 US
 City-St-Zip:
 ORLANDO, FL 32809 US

Title: MGRM () Delete Title: () Change () Addition

 Name:
 STRANG, PHILLIP E
 Name:

 Address:
 713 ASHFORD OAKS DRIVE. #103
 Address:

 City-St-Zip:
 ALTAMONTE SPRINGS, FL 32714 US
 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: ROBERT K. GUEST, JR. MGRM 02/21/2008