

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000093508

FILED  
Apr 03, 2008  
Secretary of State

**Entity Name:** AMERICAN DIRECT MARKETING, L.L.C.

**Current Principal Place of Business:**

850 NE 5TH STREET  
BOCA RATON, FL 33433

**New Principal Place of Business:**

**Current Mailing Address:**

850 NE 5TH STREET  
BOCA RATON, FL 33433

**New Mailing Address:**

**FEI Number:** 26-0891077

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

OSBORNE, R. BRADY JR.  
798 SOUTH FEDERAL HIGHWAY, STE. 100  
BOCA RATON, FL 33432 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MR ( ) Change (X) Addition  
Name: RICHARD, CHAD T  
Address: 850 NE 5TH ST  
City-St-Zip: BOCA RATON, FL 33432

Title: MR ( ) Change (X) Addition  
Name: O'BRIEN, KEVIN G  
Address: 1239 NW 15TH AVE  
City-St-Zip: BOCA RATON, FL 33486

Title: MR ( ) Change (X) Addition  
Name: LENTJES, CHRISTOPHER J  
Address: 225 NE 4TH ST  
City-St-Zip: BOCA RATON, FL 33432

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: CHAD T RICHARD

MR

04/03/2008

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