

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000058685

FILED
May 01, 2009
Secretary of State

Entity Name: U.S. INTEGRATORS HOLDING COMPANY, LLC

Current Principal Place of Business:

505 E. NEW HAVEN AVE.
MELBOURNE, FL 32901 US

New Principal Place of Business:

Current Mailing Address:

505 E. NEW HAVEN AVE.
MELBOURNE, FL 32901 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

CHAMBERLAIN, STEVEN M
2425 PINEAPPLE AVE
408
MELBOURNE, FL 32935 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: PRUTOW, KELEN L
Address: 505 E. NEW HAVEN AVE.
City-St-Zip: MELBOURNE, FL 32901 US

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

ADDITIONS/CHANGES:

Title: PRES (X) Change () Addition
Name: PRUTOW, KELEN L
Address: 505 E. NEW HAVEN AVE.
City-St-Zip: MELBOURNE, FL 32901 US

Title: TRES () Change (X) Addition
Name: PRUTOW, KELEN L
Address: 505 E. NEW HAVEN AVE
City-St-Zip: MELBOURNE, FL 32901

Title: MNGR () Change (X) Addition
Name: PRUTOW, GARY
Address: 505 E. NEW HAVEN AVE
City-St-Zip: MELBOURNE, FL 32901

Title: VP () Change (X) Addition
Name: WOOLSEY, JOHN
Address: 505 E. NEW HAVEN AVE
City-St-Zip: MELBOURNE, FL 32901

Title: VP () Change (X) Addition
Name: VALENTI, FRANK R
Address: 505 E. NEW HAVEN AVE
City-St-Zip: MELBOURNE, FL 32901

Title: SEC () Change (X) Addition
Name: PRUTOW, KELEN L
Address: 505 EAST NEW HAVEN AVE
City-St-Zip: MELBOURNE, FL 32901

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: KELEN L PRUTOW

PRES

05/01/2009

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