2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000086871

Title:

Name:

Address:

City-St-Zip:

MGRM

(X) Delete

TREVISANI, ROBERT A

225 FRANKLIN STREET

BOSTON, MA 02110

Entity Name: TELEPATH MANUFACTURING & ENGINEERING, LLC

FILED Jul 09, 2009 Secretary of State

New Principal Place of Business: Current Principal Place of Business: 2022 HENDRICKS AVE JACKSONVILLE, FL 32207 **Current Mailing Address: New Mailing Address:** 2022 HENDRICKS AVE JACKSONVILLE, FL 32207 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MASON, RAYMOND K MASON, RAYMOND K REBUILD SERVICE, INC 2022 HENDRICKS AVENUE 2022 HENDRICKS AVENUE JACKSONVILLE, FL 32207 US JACKSONVILLE, FL 32207 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: 07/09/2009 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete MASON, RAYMOND K Name: Name: 2022 HENDRICKS AVE Address: Address: City-St-Zip: JACKSONVILLE, FL 32207 City-St-Zip: Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: WILSON, J. STEVEN Name: NICHOLS, RICHARD E Address: 2022 HENDRICKS AVE Address: 2700 BUSINESS CENTER BLVD. City-St-Zip: JACKSONVILLE, FL 32207 City-St-Zip: MELBOURNE, FL 32840 US Title: MGRM () Delete Title: MGRM (X) Change () Addition NICHOLS, RICHARD E TREVISANI, ROBERT A Name: Name: 2700 BUSINESS CENTER BLVD. Address: Address: 225 FRANKLIN STREET City-St-Zip: MELBOURNE, FL 32840 City-St-Zip: BOSTON, MA 02110 US

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.

Title:

Name:

Address:

City-St-Zip:

() Change () Addition

SIGNATURE: RAYMOND K. MASON MGMR 07/09/2009