

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000107899

FILED
Apr 29, 2009
Secretary of State

Entity Name: PROFESSIONAL DOCUMENT IMAGING LLC

Current Principal Place of Business:

6193 FOREST VILLAS CIRCLE
FORT MYERS, FL 33908

New Principal Place of Business:

216 CAPE POINTE CIRCLE
JUPITER, FL 33477

Current Mailing Address:

16520 S. TAMIAMI TRAIL #18-253
FORT MYERS, FL 33908

New Mailing Address:

216 CAPE POINTE CIRCLE
JUPITER, FL 33477

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAURIA, DANIEL J
6193 FOREST VILLAS CIRCLE
FORT MYERS, FL 33908 US

Name and Address of New Registered Agent:

LAURIA, DANIEL J
216 CAPE POINTE CIRCLE
JUPITER, FL 33477 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: DANIEL J. LAURIA

04/29/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: LAURIA, DANIEL J
Address: 6193 FOREST VILLAS CIRCLE
City-St-Zip: FORT MYERS, FL 33908

Title: MGRM () Delete
Name: JONES, BONNIE
Address: 1801 BRANTLEY ROAD #1609
City-St-Zip: FORT MYERS, FL 33907

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: LAURIA, DANIEL J
Address: 216 CAPE POINTE CIRCLE
City-St-Zip: JUPITER, FL 33477

Title: MGRM (X) Change () Addition
Name: JONES, BONNIE
Address: 216 CAPE POINTE CIRCLE
City-St-Zip: JUPITER, FL 33477

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: BONNIE JONES

MS.

04/29/2009

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