

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000086501

FILED  
Jan 25, 2012  
Secretary of State

**Entity Name:** VIA RESPONSE TECHNOLOGIES, LLC

**Current Principal Place of Business:**

2216 SMOKETREE CT.  
LONGWOOD, FL 32779

**New Principal Place of Business:**

3267 PROGRESS DR  
SUITE 117  
ORLANDO, FL 32826

**Current Mailing Address:**

P.O. BOX 520014  
LONGWOOD, FL 32752

**New Mailing Address:**

FEI Number: 27-3268853      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

BURNS, JOSEPH E  
2216 SMOKETREE CT.  
LONGWOOD, FL 32779      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  
Name: MERRILL, TIM R  
Address: 1725 LEE JANZEN DRIVE  
City-St-Zip: KISSIMMEE, FL 34744

Title: MGRM  
Name: MEER, DERRICK  
Address: 14663 RIVIERA POINTE DR.  
City-St-Zip: ORLANDO, FL 32828

Title: MGRM  
Name: MARTIN, ROBERT G  
Address: 395 OLD MIMS RD.  
City-St-Zip: GENEVA, FL 32732

Title: MGRM  
Name: BURNS, JOSEPH E  
Address: 2216 SMOKETREE CT.  
City-St-Zip: LONGWOOD, FL 32779

I hereby 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: JOSEPH E BURNS

MGRM

01/25/2012

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