

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000000016

Entity Name: VERIFIER SOUTHEAST, LLC

FILED
May 12, 2005
Secretary of State

Current Principal Place of Business:

16350 NW 15TH AVENUE
MIAMI, FL 33169

New Principal Place of Business:

Current Mailing Address:

16350 NW 15TH AVENUE
MIAMI, FL 33169

New Mailing Address:

FEI Number: 65-0891273 FEI Number Applied For () FEI Number Not Applicable () 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:

PIERCE, ROBERT A
227 SOUTH CALHOUN STREET
TALLAHASSEE, FL 32301 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/MEMBERS:

Title: MEM () Delete
Name: IRVING, TOM
Address: 1549 RINGLING BLVD., SUITE 602
City-St-Zip: SARASOTA, FL 34236

Title: MGRS () Delete
Name: SMITH, DOUG
Address: 1136 THOMASVILLE RD
City-St-Zip: TALLAHASSEE, FL 32303

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DOUG SMITH

MM

05/12/2005

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