

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000006414

FILED
Apr 07, 2009
Secretary of State

Entity Name: N SQUARED INTERNATIONAL, L.C.

Current Principal Place of Business:

2621 NOBLE DRIVE
TALLAHASSEE, FL 32312

New Principal Place of Business:

2621 NOBLE DRIVE
TALLAHASSEE, FL 32308

Current Mailing Address:

2621 NOBLE DRIVE
TALLAHASSEE, FL 32312

New Mailing Address:

2621 NOBLE DRIVE
TALLAHASSEE, FL 32308

FEI Number: 59-3611056

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NORMAN, NANCY C
1415 TIMBERLANE ROAD, SUITE 201
TALLAHASSEE, FL 32312 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: NORMAN, DAVID W
Address: 2621 NOBLE DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

Title: MGRM () Delete
Name: NORMAN, NANCY C
Address: 2621 NOBLE DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

Title: MGRM () Delete
Name: NEWCOMB, BONNIE B
Address: 1951 N MERIDIAN RD APT 66
City-St-Zip: TALLAHASSEE, FL 32303

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: NORMAN, DAVID W
Address: 2621 NOBLE DRIVE
City-St-Zip: TALLAHASSEE, FL 32308

Title: MGRM (X) Change () Addition
Name: NORMAN, NANCY C
Address: 2621 NOBLE DRIVE
City-St-Zip: TALLAHASSEE, FL 32308

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

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: NANCY C. NORMAN

MGRM

04/07/2009

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