

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M00000002314

FILED
May 07, 2007
Secretary of State

Entity Name: VERITUDE LLC

Current Principal Place of Business:

82 DEVONSHIRE ST., #F7B
BOSTON, MA 02109

New Principal Place of Business:

Current Mailing Address:

82 DEVONSHIRE ST., #F7B
BOSTON, MA 02109

New Mailing Address:

FEI Number: 04-3535482 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:

Name and Address of New Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: VD () Delete
Name: LIGHT, MICHAEL R
Address: 82 DEVONSHIRE ST.
City-St-Zip: BOSTON, MA 02109

Title: D () Delete
Name: GOULDING, RICHARD
Address: 82 DEVONSHIRE ST.
City-St-Zip: BOSTON, MA 02109

Title: DP () Delete
Name: CONRAD, JACK L
Address: 82 DEVONSHIRE ST
City-St-Zip: BOSTON, MA 02109

Title: S () Delete
Name: FREEDMAN, JAY
Address: 82 DEVONSHIRE ST.
City-St-Zip: BOSTON, MA 02109

Title: DCEO () Delete
Name: MUCCI, PAUL
Address: 82 DEVONSHIRE ST
City-St-Zip: BOSTON, MA 02109

Title: D (X) Delete
Name: CAREY, WILLIAM C
Address: 82 DEVONSHIRE ST.
City-St-Zip: BOSTON, MA 02109

ADDITIONS/CHANGES:

Title: D (X) Change () Addition
Name: CONRAD, JACK
Address: 82 DEVONSHIRE ST.
City-St-Zip: BOSTON, MA 02109

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

Title: DP (X) Change () Addition
Name: LOPES, ROBERT
Address: 82 DEVONSHIRE ST
City-St-Zip: BOSTON, MA 02109

Title: D (X) Change () Addition
Name: MUCCI, PAUL
Address: 82 DEVONSHIRE ST.
City-St-Zip: BOSTON, MA 02109

Title: D (X) Change () Addition
Name: WHITE, PAUL
Address: 82 DEVONSHIRE ST
City-St-Zip: BOSTON, MA 02109

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: SUSAN STURDY

M

05/07/2007

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