2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 22, 2005
Secretary of State

DOCUMENT# M01000000943

Entity Name: ASSET CONTROL, LLC

Current Principal Place of Business:

40 WESTMINSTER ST.
PROVIDENCE, RI 02940

New Principal Place of Business:

Current Mailing Address:

40 WESTMINSTER ST.
PROVIDENCE, RI 02940

New Mailing Address:

FEI Number: 05-0510386 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: MGR ( ) Delete
Name: CARTER, BUELL J
Address: 40 WESTMINSTER ST
City-St-Zip: PROVIDENCE, RI 02903

Title: MGRM ( ) Delete
Name: CLEGG, WILLIAM J
Address: 40 WESTMINSTER ST.
City-St-Zip: PROVIDENCE, RI 02940

Title: MGR (X) Delete
Name: CAREY, JOHN F
Address: 40 WESTMINSTER STREET
City-St-Zip: PROVIDENCE, RI 02903

Title: MGR ( ) Delete
Name: ROSENBLUM, DAVID G
Address: 225 TRIANON LANE P.O. BOX 460
City-St-Zip: VILLANOVA, PA 19085

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: CAREY, JOHN F
Address: 40 WESTMINSTER ST
City-St-Zip: PROVIDENCE, RI 02903

Title: MGRM (X) Change ( ) Addition
Name: GREEN, PAUL F
Address: 40 WESTMINSTER ST.
City-St-Zip: PROVIDENCE, RI 02940

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

Title: MGR (X) Change ( ) Addition
Name: PLATT, IAN J
Address: 11575 GREAT OAKS WAY, SUITE 210
City-St-Zip: ALPHARETTA, GA 30022

Title: MGR ( ) Change (X) Addition
Name: RAYMOND, DEBRA A
Address: 40 WESTMINSTER STREET
City-St-Zip: PROVIDENCE, RI 02903

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: JOHN F. CAREY MNG 04/22/2005

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