

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000002267

FILED
Jan 08, 2007
Secretary of State

Entity Name: EXECUTIVE INFORMATION SYSTEMS, L.L.C.

Current Principal Place of Business:

6901 ROCKLEDGE DR.
SUITE 600
BETHESDA, MD 20817

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 34076
BETHESDA, MD 20827

New Mailing Address:

FEI Number: 52-2198860

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: MATHEWS, CHARLES M JR.
Address: 6901 ROCKLEDGE DRIVE STE 600
City-St-Zip: BETHESDA, MD 20817

Title: MGRM () Delete
Name: KRAUSE, R. PATRICK
Address: 6901 ROCKLEDGE DRIVE STE 600
City-St-Zip: BETHESDA, MD 20817

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 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: CHARLES M. MATHEWS JR.

MRGM

01/08/2007

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