

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000002130

FILED
Mar 23, 2009
Secretary of State

Entity Name: RESPONSE, LLC

Current Principal Place of Business:

1000 AAA DRIVE
HEATHROW, FL 32746

New Principal Place of Business:

Current Mailing Address:

PO BOX 953935
LAKE MARY, FL 32795

New Mailing Address:

FEI Number: 06-1563320

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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: MGR () Delete
Name: DONEY, MARSHALL
Address: 1000 AAA DRIVE, M/S 15
City-St-Zip: HEATHROW, FL 32746

Title: MGR () Delete
Name: BROWN, MARK
Address: 1000 AAA DRIVE, M/S 15
City-St-Zip: HEATHROW, FL 32746

Title: MGR () Delete
Name: BOUTTIER, ROBERT
Address: P.O. BOX 25001
City-St-Zip: SANTA ANA, CA 92799

Title: MGR () Delete
Name: BREGANTE, MIKE
Address: 100 VAN NESS AVENUE, BUILDING 4, 23RD FL
City-St-Zip: SAN FRANCISCO, CA 94102

Title: MGR () Delete
Name: JOHNSON, ART
Address: 12901 N. FORTY DRIVE
City-St-Zip: ST. LOUIS, MO 63141

Title: MGR () Delete
Name: GUTOWSKI, GERALD S
Address: ONE AUTO CLUB DRIVE
City-St-Zip: DEARBORN, MI 48126

ADDITIONS/CHANGES:

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

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

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

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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 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: LAURA BONERB

MGR

03/23/2009

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