

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 27, 2005 8:00 am
Secretary of State

04-27-2005 90022 014 ****55.00

DOCUMENT # M03000003638

1. Entity Name
WINDERMERE INFORMATION TECHNOLOGY SYSTEMS, LLC



Principal Place of Business
**2000 WINDERMERE COURT
ANNAPOLIS, MD 21401**

Mailing Address
**2000 WINDERMERE COURT
ANNAPOLIS, MD 21401**

14001387

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04152005 Chg-LLC CR2E083 (10/03)

City & State

City & State

4. FEI Number

52-2078259

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2005**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE MGRM ☒ Delete
NAME LIBERTY TECHNOLOGIES UNLIMITED, INC.
STREET ADDRESS 10315 CITATION WAY
CITY-ST-ZIP LAUREL, MD 20723

TITLE MGRM ☐ Change ☒ Addition
NAME Essex Corporation
STREET ADDRESS 6708 Alexander Bell Dr
CITY-ST-ZIP Columbia, MD 21046

TITLE MGRM ☒ Delete
NAME ELIZABETH TATE WINTERS TRUST
STREET ADDRESS 17929 POND ROAD
CITY-ST-ZIP ASHTON, MD 20861

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MGRM ☒ Delete
NAME SUSAN K.T. BURROWBRIDGE TRUST
STREET ADDRESS 17929 POND ROAD
CITY-ST-ZIP ASHTON, MD 20861

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MGRM ☒ Delete
NAME ANDREW PATRICK TATE TRUST
STREET ADDRESS 17929 POND ROAD
CITY-ST-ZIP ASHTON, MD 20861

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify 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 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: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

J. Kuezy Treasurer 4/21/05
Date

301-937-7001
Daytime Phone #