

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000000398

FILED
Apr 11, 2006
Secretary of State

Entity Name: EXPENSE REDUCTION SOLUTIONS, LLC

Current Principal Place of Business:

16419 NELSON PARK DRIVE, BLDG. 5, #104
CLERMONT, FL 34714

New Principal Place of Business:

16419 NELSON PARK DRIVE, #104, BLDG. 5
CLERMONT, FL 34714

Current Mailing Address:

16419 NELSON PARK DRIVE, BLDG. 5, #104
CLERMONT, FL 34714

New Mailing Address:

16419 NELSON PARK DRIVE, #104, BLDG. 5
CLERMONT, FL 34714

FEI Number: 32-0137228

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

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/MANAGERS:

Title: MGRM () Delete
Name: GRAUL, STEVEN
Address: 16419 NELSON PARK DRIVE, BLDG. 5, #104
City-St-Zip: CLERMONT, FL 34714

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GRAUL, STEVEN
Address: 16419 NELSON PARK DRIVE, #104, BLDG. 5
City-St-Zip: CLERMONT, FL 34714

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: STEVEN GRAUL

MGRM

04/11/2006

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