

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000001663

Entity Name: CLEAR-CON, LLC

FILED  
Jan 14, 2008  
Secretary of State

**Current Principal Place of Business:**

960 DEAN DRIVE  
ATLANTA, GA 30318

**New Principal Place of Business:**

2620 YONKERS ROAD  
RALEIGH, NC 27604

**Current Mailing Address:**

960 DEAN DRIVE  
ATLANTA, GA 30318

**New Mailing Address:**

2620 YONKERS ROAD  
RALEIGH, NC 27604

FEI Number: 62-1846803

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

AIRTH, H. ADAM JR.  
CLARK, CAMPBELL AND MAWHINNEY, P.A.  
500 SOUTH FLORIDA AVENUE, SUITE 800  
LAKELAND, FL 33801 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: DAVIS, THOMAS  
Address: 960 DEAN DRIVE  
City-St-Zip: ATLANTA, GA 30318

Title: MGRM ( ) Delete  
Name: DAVIS, RHONDA  
Address: 960 DEAN DRIVE  
City-St-Zip: ATLANTA, GA 30318

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: DAVIS, THOMAS  
Address: 500 YARMOUTH ROAD  
City-St-Zip: RALEIGH, NC 27604

Title: MGRM (X) Change ( ) Addition  
Name: DAVIS, RHONDA  
Address: 500 YARMOUTH ROAD  
City-St-Zip: RALEIGH, NC 27604

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: THOMAS DAVIS

MGRM

01/14/2008

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