2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000000081

Entity Name: ANSWERTU, LLC

City-St-Zip:

FILED Feb 28, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2620 SW 17TH ROAD 2620 SW 17TH ROAD OCALA, FL 34474 100 OCALA, FL 34474 **Current Mailing Address: New Mailing Address:** PO BOX 2276 LONDON, KY 40743 FEI Number: 20-2281300 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DEATON, CHRISTOPHER D MR. 2620 SW 17TH ROAD, SUITE 100 OCALA, FL 34474 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: ADDITIONS/CHANGES: () Delete MGRM Title: () Change () Addition DEATON, CHRISTOPHER D MR. Name: Name: Address: PO BOX 2276 Address: City-St-Zip: LONDON, KY 40743 City-St-Zip: Title: Title: MGRM () Change (X) Addition () Delete Name: Name: DEATON, JUDY A MS. Address: Address: PO BOX 2276 City-St-Zip: City-St-Zip: LONDON, KY 40743 Title: () Delete Title: MGRM () Change (X) Addition DEATON, JEREMY M MR. Name: Name: Address: Address: PO BOX 2276 City-St-Zip: City-St-Zip: LONDON, KY 40743 Title: () Delete Title: MGRM () Change (X) Addition Name: Name: ORR, LORI R MS. Address: Address: PO BOX 2276

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.

City-St-Zip:

LONDON, KY 40743

SIGNATURE: CHERYL A. HUBBARD VP 02/28/2008