

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000002284

Entity Name: DEMETER SYSTEMS LLC

FILED
Jan 24, 2007
Secretary of State

Current Principal Place of Business:

2457A SOUTH IAWASSEE RD. #325
ORLANDO, FL 32835

New Principal Place of Business:

1768 PARK CENTER DRIVE
SUITE 340
ORLANDO, FL 32835

Current Mailing Address:

2457A SOUTH IAWASSEE RD. #325
ORLANDO, FL 32835

New Mailing Address:

2457A SOUTH HIAWASSEE RD. #325
ORLANDO, FL 32835

FEI Number: 98-0353189

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: BASENESE, LOUIS J
Address: 8755 THE ESPLANADE, SUITE 101
City-St-Zip: ORLANDO, FL 32836

Title: MGRM () Delete
Name: TOUCHTON, PAUL E
Address: 3401 WEST END AVE. STE. 304
City-St-Zip: NASHVILLE, TN 37203

Title: MGRM (X) Delete
Name: HUBBARD, JULIA F
Address: 3401 WEST END AVE. STE. 304
City-St-Zip: NASHVILLE, TN 37203

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BASENESE, LOUIS J
Address: 2457A SOUTH HIAWASSEE ROAD, #325
City-St-Zip: ORLANDO, FL 32835

Title: MGR (X) Change () Addition
Name: HUBBARD, JULIA F
Address: 2457A SOUTH HIAWASSEE ROAD, #325
City-St-Zip: ORLANDO, FL 32805

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

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: JULIA F. HUBBARD

MGR

01/24/2007

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