

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000007145

FILED  
Mar 15, 2007  
Secretary of State

Entity Name: DIRECT ACCESS LLC

**Current Principal Place of Business:**

650 WHITE DRIVE, #200  
LAS VEGAS, NV 89119

**New Principal Place of Business:**

**Current Mailing Address:**

650 WHITE DRIVE, #200  
LAS VEGAS, NV 89119

**New Mailing Address:**

FEI Number: 88-0447412

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NATIONAL REGISTERED AGENT, INC.  
2731 EXECUTIVE PARK DRIVE, #4  
WESTON, FL 33331 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: MGR ( ) Delete  
Name: UPDIKE, ELDON JOHN  
Address: 650 WHITE DRIVE, #200  
City-St-Zip: LAS VEGAS, NV 89119

Title: MGR ( ) Delete  
Name: MUELLER, BRAD  
Address: 650 WHITE DRIVE, #200  
City-St-Zip: LAS VEGAS, NV 89119

Title: MGR ( ) Delete  
Name: WATSON, SHANE  
Address: 650 WHITE DRIVE, #200  
City-St-Zip: LAS VEGAS, NV 89119

**ADDITIONS/CHANGES:**

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

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

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: ELDON JOHN UPDIKE

MANA

03/15/2007

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