

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000002760

FILED
May 07, 2009
Secretary of State

Entity Name: CRITICAL PATH MANAGEMENT, LLC

Current Principal Place of Business:

4318 PLAINFIELD AVE. NE, STE G
GRAND RAPIDS, MI 49525

New Principal Place of Business:

4318 PLAINFIELD AVE. NE.
STE G
GRAND RAPIDS, MI 49525

Current Mailing Address:

4318 PLAINFIELD AVE. NE, STE G
GRAND RAPIDS, MI 49525

New Mailing Address:

4318 PLAINFIELD AVE. NE,
STE G
GRAND RAPIDS, MI 49525

FEI Number: 42-1721731 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR., SUITE 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: MGRM () Delete
Name: SCROGGS, JAMES
Address: 4318 PLAINFIELD AVE. NE, STE G
City-St-Zip: GRAND RAPIDS, MI 49525

Title: MGRM () Delete
Name: EASTWAY, ROBERT
Address: 4318 PLAINFIELD AVE. NE, STE G
City-St-Zip: GRAND RAPIDS, MI 49525

Title: MGRM (X) Delete
Name: SULLIVAN, ROBERT
Address: 4318 PLAINFIELD AVE. NE, STE G
City-St-Zip: GRAND RAPIDS, MI 49525

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: SULLIVAN, ROBERT
Address: 4318 PLAINFIELD AVE. NE, STE G
City-St-Zip: GRAND RAPIDS, MI 49525

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

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: ROBERT SULLIVAN

MGRM

05/07/2009

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