

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M98000001211

**FILED**  
**Feb 08, 2011**  
**Secretary of State**

**Entity Name:** VALUATION INFORMATION TECHNOLOGY, L.L.C.

**Current Principal Place of Business:**

5700 SMETANA DRIVE  
SUITE 400  
MINNETONKA, MN 55343

**New Principal Place of Business:**

10400 YELLOW CIRCLE DRIVE  
SUITE 400  
MINNETONKA, MN 55343

**Current Mailing Address:**

5700 SMETANA DRIVE  
SUITE 400  
MINNETONKA, MN 55343

**New Mailing Address:**

10400 YELLOW CIRCLE DRIVE  
SUITE 400  
MINNETONKA, MN 55343

**FEI Number:** 42-1477113

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

C T CORPORATION SYSTEM  
1200 S. 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  
**Name:** RELS, LLC  
**Address:** 10400 YELLOW CIRCLE DR., STE 400  
**City-St-Zip:** MINNETONKA, MN 55343

I hereby 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:** KATHLEEN A ELZEA

MGRM

02/08/2011

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