

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000088309

FILED  
Sep 05, 2005  
Secretary of State

Entity Name: GREAT IDEAS MARKETING, LLC

**Current Principal Place of Business:**

11100 EAST COLONIAL DRIVE  
SUITE 55  
ORLANDO, FL 32817

**New Principal Place of Business:**

1019 MANIGAN AVE.  
OVIEDO, FL 32765

**Current Mailing Address:**

1809 EAST BROADWAY  
SUITE 362  
OVIEDO, FL 32765

**New Mailing Address:**

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      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:**

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

NORTON, DEBORAH J  
1019 MANIGAN AVE.  
OVIEDO, FL 32765    US

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:                      NORTON, DEBORAH J  
Address:                      1019 MANIGAN AVE.  
City-St-Zip:                      OVIEDO, FL 32765

**ADDITIONS/CHANGES:**

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 Section 119.07(3)(i), 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: DEBORAH J NORTON

MGR

09/05/2005

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