2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000087100

Address:

City-St-Zip:

Entity Name: DIRECT HIT MARKETING & DESIGN, LLC

12794 WEST FOREST HILL BLVD SUITE 31

WELLINGTON, FL 33414

FILED May 08, 2009 Secretary of State

Current Principal Place of Business:		New Principal Plac	New Principal Place of Business:	
	ST FOREST HILL BLVD			
SUITE 31 WELLING	TON, FL 33414			
		Name Marilian a Adda		
Current IVI	lailing Address:	New Mailing Addre	ess:	
12794 WEST FOREST HILL BLVD				
SUITE 31 WELLING	TON, FL 33414			
	: 20-3492615 FEI Number Applied For() ce with s. 607.193(2)(b), F.S., the limited liability com	FEI Number Not Applicable() pany did not receive the prior not	Certificate of Status Desired () ice.	
Name and	Address of Current Registered Agent:	Name and Address	s of New Registered Agent:	
SUITE 100 WELLING	FOREST HILL BOULEVARD	urpose of changing its registe	red office or registered agent or both	
	e of Florida.	arpood or origing no regions	rea emee or regionerea agent, or bear	
SIGNATUR	RE:			
	Electronic Signature of Registered Age	nt	Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	MGRM () Delete MANNING, JOSHUA 12794 WEST FOREST HILL BLVD SUITE 31 WELLINGTON, FL 33414	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM (X) Delete BLATTE, LEW 12794 WEST FOREST HILL BLVD SUITE 31 WELLINGTON, FL 33414	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM (X) Delete ROCKWERK, AMY 12794 WEST FOREST HILL BLVD SUITE 31 WELLINGTON, FL 33414	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	MGRM () Delete MANNING, BARRY	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: BARRY S MANNING MGR 05/08/2009