

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000118921

Entity Name: MAITO INTERACTIVE, LLC

FILED  
Apr 30, 2011  
Secretary of State

**Current Principal Place of Business:**

1430 NW 5TH AVE  
# 2  
GAINESVILLE, FL 32603

**New Principal Place of Business:**

530 WEST UNIVERSITY AVENUE  
GAINESVILLE, FL 32601

**Current Mailing Address:**

1430 NW 5TH AVE  
# 2  
GAINESVILLE, FL 32603

**New Mailing Address:**

530 WEST UNIVERSITY AVENUE  
GAINESVILLE, FL 32601

FEI Number: 27-3970726

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

ALBRITTON, MICHAEL A  
4000 SW 23RD ST  
# 4306  
GAINESVILLE, FL 32608 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: LEAVITT, AVI  
Address: 1430 NW 5TH AVE - # 2  
City-St-Zip: GAINESVILLE, FL 32603

Title: MGRM  
Name: FOWERS, JEREMY  
Address: 3940 SW 20TH AVE - # 1107  
City-St-Zip: GAINESVILLE, FL 32608

Title: MGRM  
Name: ALBRITTON, MICHAEL A  
Address: 4000 SW 23RD ST - # 4306  
City-St-Zip: GAINESVILLE, FL 32608

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: AVI LEAVITT

MGRM

04/30/2011

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