2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L0000001942

JACKSONVILLE, FL 32257 US

City-St-Zip:

Entity Name: HI-ZI, LLC

FILED Feb 18, 2008 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	
8601 BEA	CH BLVD JVILLE, FL 32216		
Current Mailing Address:		New Mailing Address:	
8601 BEA UNIT 204 JACKSON	CH BLVD IVILLE, FL 32216		
FEI Number	: 59-3630402 FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of Current Registered Agent:	Name and Address	of New Registered Agent:
		purpose of changing its registere	ed office or registered agent, or both
	e of Florida. ´		3 7
SIGNATU	RE:		
Electronic Signature of Registered Age		ent Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGRM () Delete PACE, JOHNSON H 135 TRIPLE OAK DRIVE ANDERSON, SC 29625 US	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGR () Delete FORD, NANCY PACE 8601 BEACH BLVD, UNIT 204 JACKSONVILLE, FL 32216 US	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGRM () Delete CHANCEY, MARGARET P 4543 BULL RUN ROAD JACKSONVILLE, FL 32210 US	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address:	MGRM () Delete PACE, JAMES H 4083 SUNBEAM ROAD, APT 2313	Title: Name: Address:	() 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.

City-St-Zip:

SIGNATURE: NANCY PACE FORD MGR 02/18/2008