2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 05, 2010
Secretary of State

DOCUMENT# L00000002525

Entity Name: IT VENTURES, L.L.C.

Current Principal Place of Business:

7153 WEST HWY 98
PANAMA CITY BEACH, FL 32407

New Principal Place of Business:

Current Mailing Address:

7153 WEST HWY 98
PANAMA CITY BEACH, FL 32407

New Mailing Address:

FEI Number: 63-1243720 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **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:

WILSON, STEPHEN R
7153 WEST HWY 98
PANAMA CITY BEACH, FL 32407 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: MGR
Name: WILSON, STEPHEN R
Address: 3813 MARINER DR., UNIT E
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: MGR
Name: INNES B. HORNSBY REVOCABLE TRUST
Address: 3956 DUNWOODY DR
City-St-Zip: PENSACOLA, FL 32503

Title: MGR
Name: GRAY, JAMES A
Address: 3631 MITCHELL LAKE DR.
City-St-Zip: GAINESVILLE, GA 30506

Title: MGR
Name: DOZIER, PHILLIP M
Address: 102 BOCAGE DR.
City-St-Zip: DOTHAN, AL 36303

Title: MGR
Name: WILSON, GEORGE E JR.
Address: 206 ASHPODEL DR.
City-St-Zip: DOTHAN, AL 36303

Title: MGR
Name: WILSON, STEPHANIE M
Address: 3813 MARINER DR., #E
City-St-Zip: PANAMA CITY BEACH, FL 32408

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 Statues.

SIGNATURE: STEPHEN WILSON D 05/05/2010

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