

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000022223

FILED
May 10, 2004
Secretary of State

Entity Name: IDEA-TECHNOLOGY.COM, LLC

Current Principal Place of Business:

4021 GALT ISLAND AVENUE
ST. JAMES CITY, FL 33956

New Principal Place of Business:

Current Mailing Address:

4021 GALT ISLAND AVENUE
ST. JAMES CITY, FL 33956

New Mailing Address:

FEI Number: 65-1134818

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, LOWELL E
4021 GALT ISLAND AVENUE
ST. JAMES CITY, FL 33956 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/MEMBERS:

Title: D () Delete
Name: JOHNSON, LOWELL E
Address: 4021 GALT ISLAND AVENUE
City-St-Zip: ST. JAMES CITY, FL 33956

Title: D () Delete
Name: JOHNSON, BABBY J
Address: 4021 GALT ISLAND AVENUE
City-St-Zip: ST. JAMES CITY, FL 33956

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: JOHNSON, LOWELL E
Address: 4021 GALT ISLAND AVENUE
City-St-Zip: ST. JAMES CITY, FL 33956

Title: MGRM (X) Change () Addition
Name: JOHNSON, BABBY J
Address: 4021 GALT ISLAND AVENUE
City-St-Zip: ST. JAMES CITY, FL 33956

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: LOWELL E JOHNSON

MGR

05/10/2004

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