

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000016967

FILED  
Apr 26, 2004  
Secretary of State

Entity Name: I2ART LLC

## Current Principal Place of Business:

1027 COLUMBIA AVE  
PALM HARBOR, FL 34683 US

## New Principal Place of Business:

178 MARINER BLVD. #191  
SPRING HILL, FL 34609 US

## Current Mailing Address:

PO BOX 1136  
PALM HARBOR, FL 346821136 US

## New Mailing Address:

178 MARINER BLVD. #191  
SPRING HILL, FL 34609 US

FEI Number: 51-0417361

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROBISON, LINDA R  
6450 PINE AVENUE  
SANIBEL, FL 33957 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: MGRM ( ) Delete  
Name: ST AMAND, MICHAEL  
Address: 1027 COLUMBIA AVE  
City-St-Zip: PALM HARBOR, FL 34683

Title: MGRM ( ) Delete  
Name: ROBISON, ROBERT A  
Address: 6450 PINE AVE  
City-St-Zip: SANIBEL, FL 339572034

Title: MGRM ( ) Delete  
Name: POEHLMANN, CHRISTOPHER  
Address: 5950 JEFFERY LANE  
City-St-Zip: FORT MYERS, FL 33907

Title: MGRM ( ) Delete  
Name: KRAMER, KATE  
Address: 5950 JEFFERY LANE  
City-St-Zip: FORT MYERS, FL 33907

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MICHAEL ST. AMAND

MGRM

04/26/2004

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