2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 22, 2004 8:00 am Secretary of State

DOCUI 1. Entity Nam ITV, LLC	MENT # LO	30000014	155						04-22-200	4 90355	043 ****5	50.00
Principal Place of Business 1977 IMPERIAL GOLF COURSE BLVD. NAPLES, FL 34110			Mailing Address 1977 IMPERIAL GOLF COURSE BLVD. NAPLES, FL 34110					18/18 (1) 18/1 88 98	2405		FO C 311 SR I C	
2. Principal Place of Business			3. Mailing Address								 	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				04082004	Chg-LLC	CR2E0	83 (10/03)		
City & State			City & State					4. FEI Numbe				plied For t Applicable
Zip	Country		Zip		Country				of Status Desired		\$5.00 Add Fee Required	
	6. Name and Add	lress of Current F	egistered Ag	ent				7. Name and	Address of New	Registered /	Agent	
						Name						
NOVATT, JEFF M ESQ CHEFFY, PASSIDOMO, WILSON & JOHN 821 FIFTH AVE. SOUTH, STE. 201 NAPLES, FL 34102			ISON LLP			Street Add		P.O. Box Numbe	er is Not Acceptab	le)		
MAI EEO, I	12 34102					City				FL	Zip Code)
	named entity submits ions of registered age		the purpose o	of changing its re	egistere	ed office or	register	ed agent, or bot	th, in the State of F	lorida. I am	familiar with,	and accept
SIGNATURE	Signature, typed or printed na	me of registered agent as	nd title if applicable	. (NOTE: I	Registere	d Agent signatu	ure required	when reinstating)	. 11	DATE	<u> </u>	(C) (E)
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indicated on this report is true and accurate and that my 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: SIGNATURE AND THED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daylime Phone #