



# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Mar 04, 2004 8:00 am**  
**Secretary of State**

03-04-2004 90073 003 \*\*\*\*50.00

DOCUMENT # L03000002486																																																	
<b>1. Entity Name</b> NIT HOLDINGS, LLC																																																	
<b>Principal Place of Business</b> 220 SOUTH RIDGEWOOD AVE., SUITE 200 DAYTONA BEACH, FL 32114			<b>Mailing Address</b> 220 SOUTH RIDGEWOOD AVE., SUITE 200 DAYTONA BEACH, FL 32114																																														
<b>2. Principal Place of Business</b> 12 WOODLAKE DR Suite, Apt. #, etc.		<b>3. Mailing Address</b> 12 WOODLAKE DR Suite, Apt. #, etc.																																															
<b>City &amp; State</b> PORT ORANGE FL		<b>City &amp; State</b> PORT ORANGE FL		<b>4. FEI Number</b> 48-1301904																																													
<b>Zip</b> 32129		<b>Country</b> VOLUNIA		<b>5. Certificate of Status Desired</b> <input type="checkbox"/> \$5.00 Additional Fee Required																																													
<b>6. Name and Address of Current Registered Agent</b> JOHNSON, ROBERT L 220 SOUTH RIDGEWOOD AVE., SUITE 200 DAYTONA BEACH, FL 32114				<b>7. Name and Address of New Registered Agent</b> Name: DAN BOLEJACK Street Address (P.O. Box Number is Not Acceptable): 4250 PENINSULA City: DAYTONA BEACH FL Zip Code: 32118																																													
<b>8. 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. I am familiar with, and accept the obligations of registered agent.</b> SIGNATURE: <i>Dan Bolejack</i> (NOTE: Registered Agent signature required when reinstating) DATE: 3-01-04																																																	
<b>Filing Fee is \$50.00</b> <b>Due by May 1, 2004</b>			<b>Make check payable to</b> <b>Florida Department of State</b>																																														
<b>9. MANAGING MEMBERS/MANAGERS</b>				<b>10. ADDITIONS/CHANGES</b>																																													
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<b>11. I hereby certify that the information supplied with this filing does not qualify 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 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.</b>																																																	
<b>SIGNATURE:</b> <i>Joe D. Martin</i> <b>JOE D. MARTIN</b>				<b>3/1/04</b> <b>386/423-8988</b> Date Daytime Phone #																																													