

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Apr 05, 2004 8:00 am
Secretary of State

04-05-2004 90503 032 ****50.00

DOCUMENT # L03000006248

1. Entity Name

I.T.H. LLC -



Principal Place of Business: 10641 AVIATION BOULEVARD, MARATHON FL 33050
 Mailing Address: 10641 AVIATION BOULEVARD, MARATHON FL 33050

24036069



MOORE CR2E083 (11/03)

2. Principal Place of Business: Suite, Apt. #, etc., City & State, Zip, Country
 3. Mailing Address: Suite, Apt. #, etc., City & State, Zip, Country

4. FEI Number: 01-0768507
 Applied For: Not Applicable
 5. Certificate of Status Desired: \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
 SPIEGEL & UTRERA, P.A.
 1840 SW 22ND ST.
 4TH FLOOR
 MIAMI FL 33145

7. Name and Address of New Registered Agent
 Name: RHONDA J. HOLDING
 Street Address: 10641 AVIATION BLVD.
 City: MARATHON FL Zip Code: 33050

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.

SIGNATURE: Rhonda J. Holding, RHONDA J. HOLDING MGR, DATE: 3-29-04
(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2004

9. MANAGING MEMBERS / MANAGERS

TITLE	MGR	<input type="checkbox"/> Delete
NAME	HOLDING, MARK A	
STREET ADDRESS	10641 AVIATION BOULEVARD	
CITY - ST - ZIP	MARATHON FL 33050	
TITLE	MGR	<input type="checkbox"/> Delete
NAME	HOLDING, RHONDA J	
STREET ADDRESS	10641 AVIATION BOULEVARD	
CITY - ST - ZIP	MARATHON FL 33050	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

10. ADDITIONS / CHANGES

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

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.

SIGNATURE: Rhonda Holding, RHONDA HOLDING VICE PRESIDENT, DATE: 3-29-04, 305-743-2091
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE