


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 07, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000034854 1. Entity Name LAWIT, LLC	
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Principal Place of Business 2476 N. ESSEX AVENUE HERNANDO, FL 34442	Mailing Address 2476 N. ESSEX AVENUE HERNANDO, FL 34442
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DO NOT WRITE IN THIS SPACE

01192005No Chg-LLC CR2E083 (10/03)

4. FEI Number 32-0092081	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent ABEL, ERIC D ESQ 2476 N. ESSEX AVENUE HERNANDO, FL 34442

**DO NOT WRITE
IN THIS SPACE**

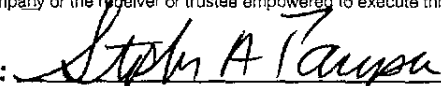
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR TAMPOSI, STEPHEN A 2476 N. ESSEX AVE. HERNANDO, FL 34442
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03/07/05-80094-018 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: 	Stephen A. Tamposi	3/4/05	352-746-6060
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>		<small>Date</small>	<small>Daytime Phone #</small>