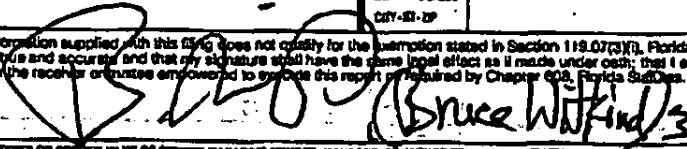


FILED
Jun 21, 2004 8:00 am
Secretary of State

04-01-2004 90219 025 ****50.00

2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT

4/12/4

DOCUMENT # L03000044156			
1. Entity Name FOUNDIT, L.L.C.			
Principal Place of Business 600 GULF SHORE DR., STE. 605 DESTIN, FL 32541		Mailing Address 600 GULF SHORE DR., STE. 605 DESTIN, FL 32541	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. Name and Address of Current Registered Agent MATTHEWS, DANA C ESO MATTHEWS & HAWKINS, P.A. 607 HIGHWAY 98 EAST DESTIN, FL 32541		5. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
6. 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 Signature, typed or printed name of registered agent and sign if applicable. (NOTE: Registered Agent signature required when reappointing.) DATE			
Filing Fee is \$50.00 Due by May 1, 2004		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP
☐ Delete	☐ Delete	☐ Change ☐ Addition	☐ Change ☐ Addition
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☐ Delete	☐ Delete	☐ Change ☐ Addition	☐ Change ☐ Addition
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☐ Delete	☐ Delete	☐ Change ☐ Addition	☐ Change ☐ Addition
11. I hereby certify that the information supplied with this filing does not conflict for the information stated in Section 119.07(3)(b), 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 605, Florida Statutes.			
SIGNATURE: 		Date 3/26/04	
SIGNATURE AND TYPE OR PRINTED NAME OF EXISTING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date 8/26/04	