

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000029326

Entity Name: PAYDIRT VENTURES I LLC

FILED
Mar 11, 2007
Secretary of State

Current Principal Place of Business:

318 INDIAN TRACE, #109
WESTON, FL 33326

New Principal Place of Business:

Current Mailing Address:

318 INDIAN TRACE, #109
WESTON, FL 33326

New Mailing Address:

FEI Number: 20-2570935

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLINE, JAMES L
318 INDIAN TRACE, #109
WESTON, FL 33326 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: CLINE, JAMES L MEMBER
Address: 318 INDIAN TRACE #109
City-St-Zip: WESTON, FL 33326

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR () Change (X) Addition
Name: SANDERS, KENNETH MEMBER
Address: 318 INDIAN TRACE #109
City-St-Zip: WESTON, FL 33326

Title: MGR () Change (X) Addition
Name: AMOS III, JOHN MEMBER
Address: 318 INDIAN TRACE #109
City-St-Zip: WESTON, FL 33326

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: JAMES CLINE

MBR

03/11/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date