2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000049477

1. Entity Name

IT PROCUREMENT, LLC



FILED Apr 11, 2007 08:00 A Secretary of State

Principal Place of Business

15016 MIDDLE FAIRWAY DRIVE BROOKSVILLE, FL 34609

Mailing Address

15016 MIDDLE FAIRWAY DRIVE BROOKSVILLE, FL 34609



04012007 No Chg-LLC

CR2E083 (11/05)

| 4. FEI Number 84-1679760 | | Applied For Not Applicable |
|----------------------------------|------|-------------------------------|
| 04-10/9/00 | | Inor wholicable |
| 5. Certificate of Status Desired | | Additional equired |

Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

DUNBAR, EDWARD J 15016 MIDDLE FAIRWAY DRIVE BROOKSVILLE, FL 34609

DO NOT WRITE IN THIS SPACE

| | | , | | |
|---|--|--|---|--|
| 8. The above the obligat | named entity submits this statement for the purpose of charions of registered agent. | nging its registered office or registered agent, or bo | th, in the State of Florida. I am familiar with, and accept | |
| SIGNATURE. | Signature, typed or printed name of registered agent and title if applicable | (NOTE: Registered Agent signature required when reinstating) | DATE | |
| F | iling Fee is \$50.00 ue by May 1, 2007 | | | |
| 9. | MANAGING MEMBERS/MANAGERS | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM DUNBAR, EDWARD J 15016 MIDDLE FAIRWAY DRIVE BROOKSVILLE, FL 34609 | | 000000699166 04/19/07-80031-022 50.00 | |
| NAME STREET ADDRESS CITY-ST-ZIP | MGRM DUNBAR, CATHERINE A 15016 MIDDLE FAIRWAY DRIVE BROOKSVILLE, FL 34609 | | | |
| TITLE * NAME STREET ADDRESS CITY-ST-ZIP | | DO | NOT WRITE | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | IN ' | THIS SPACE | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | · P | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | |

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 further execute this report as required by Chapter 608, Florida Statutes.

SIGNATORY AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE