

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000116086

Entity Name: IPITOMY COMMUNICATIONS, LLC

FILED
Jan 18, 2008
Secretary of State

Current Principal Place of Business:

200 S. WASHINGTON BLVD.
SUITE 1
SARASOTA, FL 34236 US

Current Mailing Address:

200 S. WASHINGTON BLVD.
SUITE 1
SARASOTA, FL 34236 US

FEI Number: 20-3896609

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRANICA, NICKOLAS A
200 S. WASHINGTON BLVD.
SUITE 1
SARASOTA, FL 34236 US

New Principal Place of Business:

1940 NORTHGATE BLVD.
SUITE B-1
SARASOTA, FL 34234 US

New Mailing Address:

1940 NORTHGATE BLVD.
SUITE B-1
SARASOTA, FL 34234 US

Name and Address of New Registered Agent:

BRANICA, NICKOLAS A
1940 NORTHGATE BLVD.
SUITE B-1
SARASOTA, FL 34234 US

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:

01/18/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BRANICA, NICKOLAS A
Address: 8230 SANDERLING ROAD
City-St-Zip: SARASOTA, FL 34242 US

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

ADDITIONS/CHANGES:

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

Title: MGRM () Change (X) Addition
Name: BRANICA, TONIE R
Address: 8230 SANDERLING ROAD
City-St-Zip: SARASOTA, FL 34242

I hereby certify that the information supplied with this filing does not qualify 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: TONIE BRANICA

MGRM

01/18/2008

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