

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000033641

FILED
Apr 10, 2008
Secretary of State

Entity Name: CHIX THAT FIX, LLC

Current Principal Place of Business:

6249 51ST TERRACE NORTH
ST. PETERSBURG, FL 33709 US

New Principal Place of Business:

Current Mailing Address:

6249 51ST TERRACE NORTH
ST. PETERSBURG, FL 33709 US

New Mailing Address:

FEI Number: 20-4597586 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

FUSON, KATHY M
6249 51ST TERRACE NORTH
ST. PETERSBURG, FL 33709 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: INGRAM, JAN E
Address: 2734 LICK CREEK RD.
City-St-Zip: LINDEN, TN 37096 US

Title: MGRM () Delete
Name: FUSON, AUDREY T
Address: 6249 51ST TERRACE NORTH
City-St-Zip: ST. PETERSBURG, FL 33709 US

ADDITIONS/CHANGES:

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

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

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: KATHY M. FUSON

PRES

04/10/2008

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