

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000005438

FILED  
Jul 12, 2008  
Secretary of State

Entity Name: MADMITCH, LLC

**Current Principal Place of Business:**

17617 ARCHLAND PASS RD.  
LUTZ, FL 33558 US

**New Principal Place of Business:**

**Current Mailing Address:**

17617 ARCHLAND PASS RD.  
LUTZ, FL 33558 US

**New Mailing Address:**

FEI Number: 20-8233505      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

ISAAK & ZWIRN, PA  
2107 W. CASS ST.  
SUITE A  
TAMPA, FL 33606 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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: LEWIS, DONALD J  
Address: 17617 ARCHLAND PASS RD.  
City-St-Zip: LUTZ, FL 33558 US

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

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

**ADDITIONS/CHANGES:**

Title: MR. (X) Change ( ) Addition  
Name: LEWIS, DONALD J  
Address: 17617 ARCHLAND PASS RD.  
City-St-Zip: LUTZ, FL 33558 US

Title: MR. ( ) Change (X) Addition  
Name: LEWIS, MITCHELL T  
Address: 17617 ARCHLAND PASS RD.  
City-St-Zip: LUTZ, FL 33558 US

Title: MS. ( ) Change (X) Addition  
Name: LEWIS, MADISON H  
Address: 17617 ARCHLAND PASS RD.  
City-St-Zip: LUTZ, FL 33558 US

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: DONALD J. LEWIS

PRES

07/12/2008

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