


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 13, 2008 8:00 am
Secretary of State

02-13-2008 90061 047 ***143.75

DOCUMENT # L07000021227 1. Entity Name MKT DIRECT LLC			
Principal Place of Business 11523 PALM BRUSH TRAIL SUITE 193 BRADENTON, FL 34202		Mailing Address 11523 PALM BRUSH TRAIL SUITE 193 BRADENTON, FL 34202	
2. Principal Place of Business - No P.O. Box # 15214 BLUE FISH CIRCLE		3. Mailing Address 15214 BLUE FISH CIRCLE	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 	
City & State BRADENTON, FL.		City & State BRADENTON, FL.	
Zip 34202		Zip 34202	
Country USA		Country USA	
4. FEI Number 20-8502936		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent BUSINESS FILINGS INCORPORATED 1203 GOVERNOR'S SQUARE BLVD SUITE 101 TALLAHASSEE, FL 32301-2960		7. Name and Address of New Registered Agent Name CHRIS HARDING Street Address (P.O. Box Number is Not Acceptable) 15214 BLUE FISH CIRCLE City BRADENTON FL Zip Code 34202	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>Chris Harding</u> DATE <u>2/20/08</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75		Make check payable to Florida Department of State	
9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM HARDING, CHRIS 15214 BLUEFISH CIR. BRADENTON, FL 34202 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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11. I hereby certify that the information supplied with this filing 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 trustee empowered to execute this report as required by Chapter 608, Florida Statutes.			
SIGNATURE: <u>Chris Harding</u> CHRIS HARDING		<u>2/20/08</u> 941-773-2412 <small>Date Daytime Phone #</small>	