

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000002615

Entity Name: PLUG IT.COM, LLC

FILED
Apr 27, 2008
Secretary of State

Current Principal Place of Business:

226 SOUTH PALAFOX STREET
4TH FLOOR
PENSACOLA, FL 32501

New Principal Place of Business:

226 PALAFOX PLACE
SUITE 400
PENSACOLA, FL 32502

Current Mailing Address:

226 SOUTH PALAFOX STREET
4TH FLOOR
PENSACOLA, FL 32501

New Mailing Address:

226 PALAFOX PLACE
SUITE 400
PENSACOLA, FL 32502

FEI Number: 59-3579109

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CAMPBELL, JAMES S
BEGG AND LANE
501 COMMENDENCIA ST.
PENSACOLA, FL 32502 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: WHIBBS, VINNIE J CEO
Address: 226 S. PALAFOX STREET
City-St-Zip: PENSACOLA, FL 32502 US

Title: MGR () Delete
Name: APPLEYARD, RICHARD L MGR
Address: 4400 BAYOU BOULEVARD
City-St-Zip: PENSACOLA, FL 32503 US

Title: MGR () Delete
Name: SWITZER, ROBERT J MGR
Address: P.O. BOX 1313
City-St-Zip: PENSACOLA, FL 32596 US

Title: MGR () Delete
Name: BULLOCK, ELLIS W MGR
Address: P. O. BOX 1983
City-St-Zip: PENSACOLA, FL 32591 US

Title: MGR () Delete
Name: O'SULLIVAN, MORT J MGR
Address: 316 S. BAYLEN ST.
City-St-Zip: PENSACOLA, FL 32591 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: WHIBBS, VINNIE J MGR
Address: 1917 WANDERING ROAD
City-St-Zip: ENCINITAS, CA 92023 US

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

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

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

Title: MGR (X) Change () Addition
Name: O'SULLIVAN, MORT J MGR
Address: 316 S. BAYLEN ST., SUITE 200
City-St-Zip: PENSACOLA, FL 32591 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: SONYA L GARES

MS

04/27/2008

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