

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000003983

Entity Name: PROOFITONLINE.COM LLC

FILED
Aug 02, 2007
Secretary of State

Current Principal Place of Business:

200 CASCADE POINTE LANE
#106
CARY, NC 27513

New Principal Place of Business:

Current Mailing Address:

200 CASCADE POINTE LANE
#106
CARY, NC 27513

New Mailing Address:

FEI Number: 59-3585658 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:

GRANT, RICHARD C
5551 RIDGEWOOD DRIVE, SUITE 501
NAPLES, FL 34108 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: MGRM () Delete
Name: MUNZ, ROBERT
Address: 108 BARNES SPRING COURT
City-St-Zip: CARY, NC 27519

Title: MGRM () Delete
Name: MUNZ, MARY BETH
Address: 108 BARNES SPRING COURT
City-St-Zip: CARY, NC 27513

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: MARY E MUNZ

MM

08/02/2007

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