

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 16, 2007 08:00 AM
Secretary of State

DOCUMENT # M05000002526 1. Entity Name HIT HOLDINGS OF TAMPA, L.L.C.	
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Principal Place of Business 9828 CURRIE DAVIS DRIVE TAMPA, FL 33619	Mailing Address 9828 CURRIE DAVIS DRIVE TAMPA, FL 33619
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DO NOT WRITE IN THIS SPACE



01092007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-2584280	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

NEUSE, CLIFFORD
 9828 CURRIE DAVIS DRIVE
 TAMPA, FL 33619

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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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

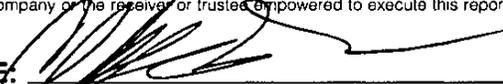
**Filing Fee is \$50.00
 Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM NEUSE, DOUG 225 MILLWELL DRIVE MARYLAND HEIGHTS, MO 63043
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM NEUSE, CLIFF 225 MILLWELL DRIVE MARYLAND HEIGHTS, MO 63043
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 04/26/07-80068-018 50.00

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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:  _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date: 1/09/07 Daytime Phone #: 314 209-7516