

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000050824

FILED
Apr 30, 2008
Secretary of State

Entity Name: DIGITAL INFORMATION TECHNOLOGIES INC.

Current Principal Place of Business:

2937 BEE RIDGE RD.
SUITE 11
SARASOTA, FL 34239 US

New Principal Place of Business:

Current Mailing Address:

2937 BEE RIDGE RD.
SUITE 11
SARASOTA, FL 34239 US

New Mailing Address:

FEI Number: 65-0935232 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHERIDAN, TROY
5338 FOXWOOD DR.
SARASOTA, FL 34232 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: OPD () Delete
Name: SHERIDAN, TROY
Address: 5338 FOXWOOD DR
City-St-Zip: SARASOTA, FL 34232

Title: OD () Delete
Name: LEFROCK, JACK L
Address: 647 WATERSIDE WAY
City-St-Zip: SARASOTA, FL 34242

Title: OVD () Delete
Name: FERNANDEZ, ROB
Address: 1927 GOLDENROD STREET
City-St-Zip: SARASOTA, FL 34239 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TROY SHERIDAN

OPD

04/30/2008

Electronic Signature of Signing Officer or Director

Date