


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**


**FILED**  
**Apr 18, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # V29308**  
 1. Entity Name  
**MADIT, INC.**



Principal Place of Business      Mailing Address  
**6850 22 AVENUE NORTH**      **6850 22 AVENUE NORTH**  
**ST. PETERSBURG, FL 33710 US**      **ST. PETERSBURG, FL 33710 US**

**DO NOT WRITE IN THIS SPACE**



01252008    No Chg-P    CR2E034 (11/05)

4. FEI Number <b>59-3144650</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**BURROUGHS, WILLIAM**  
**6850-22 AVENUE NORTH**  
**ST. PETERSBURG, FLORIDA**  
**ST PETERSBURG, FL 33710**

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

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.        **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BURROUGHS, WILLIAM 6850-22 AVENUE NORTH ST PETERSBURG, FL
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12. 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 or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with my address, with all other like empowered.

SIGNATURE: Wm Burroughs      Date: 4-10-08      Daytime Phone #: (727) 344-3565  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR