

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000007718

Entity Name: CSI IT, LLC**Current Principal Place of Business:**3512 MACLAY BOULEVARD SOUTH, SUITE 102
TALLAHASSEE, FL 32312**Current Mailing Address:**3512 MACLAY BOULEVARD SOUTH, SUITE 102
TALLAHASSEE, FL 32312**FEI Number:** 20-0718698**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BENDIX, JOSEPH
3512 MACLAY BOULEVARD SOUTH, SUITE 102
TALLAHASSEE, FL 32312 US*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:** JOSEPH BENDIX

01/09/2015

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AUTHORIZED MEMBER
Name EDWARDS, THOMAS H
Address 3512 MACLAY BOULEVARD SOUTH,
SUITE 102
City-State-Zip: TALLAHASSEE FL 32312

Title AUTHORIZED MEMBER
Name DUNGEY, SCOTT W
Address 3512 MACLAY BOULEVARD SOUTH,
SUITE 102
City-State-Zip: TALLAHASSEE FL 32312

Title CFO, DIRECTOR
Name LIGHTFOOT, VALERIE
Address 3512 MACLAY BOULEVARD SOUTH,
SUITE 102
City-State-Zip: TALLAHASSEE FL 32312

Title CEO, DIRECTOR
Name BENDIX, JOSEPH
Address 3512 MACLAY BOULEVARD SOUTH,
SUITE 102
City-State-Zip: TALLAHASSEE FL 32312

I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: VALERIE LIGHTFOOT

CFO

01/09/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date