

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000018014

FILED  
Jul 01, 2004  
Secretary of State

Entity Name: MEDIA EVOLUTION PRODUCTIONS, LLC

**Current Principal Place of Business:**

4401 S. ORANGE AVE  
EDGEWOOD, FL 32806

**New Principal Place of Business:**

4401 S. ORANGE AVE  
ORLANDO, FL 32806

**Current Mailing Address:**

8418 DOVER VIEW LANE  
ORLANDO, FL 32829

**New Mailing Address:**

FEI Number: 13-4196314      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BROCK, RICHARD D  
1301 RIVERPLACE BLVD.  
SUITE 2400  
JACKSONVILLE, FL 32207

**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/MEMBERS:**

Title: MGRM ( ) Delete  
Name: FATONE, STEVEN  
Address: 2746 WOODRUFF DR.  
City-St-Zip: ORLANDO, FL 32837

Title: MGRM ( ) Delete  
Name: MULVAHILL, JOE  
Address: 8120 OAK PARK RD  
City-St-Zip: ORLANDO, FL 32819

Title: MGRM ( ) Delete  
Name: ARGENTI, MARK E  
Address: 3107 LAKE MARGARET DR  
City-St-Zip: ORLANDO, FL 32806

Title: MGRM ( ) Delete  
Name: FATONE, JOSEPH A JR.  
Address: 2746 WOODRUFF DR.  
City-St-Zip: ORLANDO, FL 32837

Title: MGRM ( ) Delete  
Name: MCDANIEL, IAN B  
Address: 8418 DOVER VIEW LANE  
City-St-Zip: ORLANDO, FL 32829

Title: MGRM ( ) Delete  
Name: FATONE, JOSEPH SR.  
Address: 2746 WOODRUFF DR.  
City-St-Zip: ORLANDO, FL 32837

**ADDITIONS/CHANGES:**

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

Title: MGRM (X) Change ( ) Addition  
Name: MULVIHILL, JOE  
Address: 8120 OAK PARK RD  
City-St-Zip: ORLANDO, FL 32819

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

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 for the exemption stated in Section 119.07(3)(i), 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: IAN MCDANIEL

MGRM

07/01/2004

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