

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000022891

FILED  
Mar 25, 2009  
Secretary of State

Entity Name: STREET OUTDOOR - OSCEOLA COUNTY, LLC

**Current Principal Place of Business:**

52 RILEY RD  
#377  
CELEBRATION, FL 34747

**New Principal Place of Business:**

**Current Mailing Address:**

52 RILEY RD  
#377  
CELEBRATION, FL 34747

**New Mailing Address:**

FEI Number: 20-4453811

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TRENTO, THOMAS A  
2907 CORMORANT RD.  
DELRAY BEACH, FL 33444 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: STREET AMERICA GROUP, , LLC  
Address: 2200 4TH AVE. N. # 3  
City-St-Zip: LAKE WORTH, FL 33461

Title: MGR ( ) Delete  
Name: MGT VENTURES, INC.,  
Address: 4877 LAKE CECILE DR.  
City-St-Zip: KISSIMMEE, FL 34746 US

Title: MGRM ( ) Delete  
Name: TERRICO, MARTIN E  
Address: 52 RILEY RD #377  
City-St-Zip: CELEBRATION, FL 34747

**ADDITIONS/CHANGES:**

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 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: THOMAS TRENTO

MGR

03/25/2009

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