## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M08000001829

Entity Name: CAPITOL RECORDS, LLC

FILED Apr 20, 2009 Secretary of State

Current Principal Place of Business:			New Prince	New Principal Place of Business:	
150 FIFTH NEW YOR	AVE RK, NY 10011				
Current Mailing Address:			New Maili	New Mailing Address:	
150 FIFTH AVE NEW YORK, NY 10011		SUITE 205	2751 CENTERVILLE ROAD SUITE 205 WILMINGTON, DE 19808		
FEI Number:	: 26-2314792	FEI Number Applied For ( )	FEI Number Not App	licable ( ) Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:	
1201 HAYS TALLAHAS The above in the State	SSEE, FL 3230 named entity set of Florida.	012525 US	urpose of changing	its registered office or registered agent, or both,	
SIGNATUF		ic Signature of Registered Age	ent	 Date	
MANAGING MEMBERS/MANAGERS:				ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGR () FINKELSTEIN, 0 150 FIFTH AVE NEW YORK, NY		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	MGR () FEINGOLD, SU: 150 FIFTH AVE NEW YORK, NY		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	( )	Delete	Title: Name: Address: City-St-Zip:	MGR ( ) Change (X) Addition KAHN, PAUL 150 FIFTH AVE NEW YORK, NY 10011	
Title: Name: Address: City-St-Zip:	( )	Delete	Title: Name: Address: City-St-Zip:	AVPT ( ) Change (X) Addition ROBINSON, REBECCA 2751 CENTERVILLE ROAD, SUITE 205 WILMINGTON, DE 19808	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	AS ( ) Change (X) Addition FULGINITI, KATHLEEN 2751 CENTERVILLE ROAD, SUITE 205 WILMINGTON, DE 19808	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	AT ( ) Change (X) Addition THOMPSON, PAMELA 2751 CENTERVILLE ROAD, SUITE 205 WILMINGTON, DE 19808	

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: REBECCA ROBINSON AVPT 04/20/2009