2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000003022

Entity Name: SILVER LINING STUDIOS, L.L.C.

FILED May 01, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3315 MAGGIE BLVD. 3315 MAGGIE BLVD.

SUITE 100 SUITE 100

ORLANDO, FL 32811 US

Current Mailing Address: New Mailing Address:

3315 MAGGIE BLVD., SUITE 100 3315 MAGGIE BLVD.

SUITE 100 SUITE 100

ORLANDO, FL 32811 US

FEI Number: 42-1529633 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

REECE, MARSHA D

1850 LONG POND DRIVE

1 ONGWOOD EL 32779 LIS

REECE, MARSHA D

3315 MAGGIE BLVD.

SUITE 100

LONGWOOD, FL 32779 US SUITE 100 ORLANDO, FL., FL 32811 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: 05/01/2008

Electronic Signature of Registered Agent Date

ADDITIONS/CHANGES:

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete Title: MGR (X) Change () Addition

Name: BUSTIN' LOOSE PRODUC, TIONS, INC. Name: MD REECE,

 Address:
 1850 LONG POND DRIVE
 Address:
 3315 MAGGIE BLVD. SUITE 100

 City-St-Zip:
 LONGWOOD,, FL 32779 US
 City-St-Zip:
 ORLANDO, FL 32811 US

Title: MGR () Delete Title: (X) Change () Addition Name: REECE, MARSHA M Name: WENDY'S KCDA PRODUCT, IONS Address: 1850 LONG POND DRIVE Address: 9158 GREAT HERON CIRCLE City-St-Zip: LONGWOOD, FL 32779 City-St-Zip: ORLANDO, FL 32836 US

Title: MGR (X) Delete Title: () Change () Addition

 Name:
 WENDY'S KCDA PRODUCT, IONS
 Name:

 Address:
 9158 GREAT HERON CIRCLE
 Address:

 City-St-Zip:
 ORLANDO, FL 32836 US
 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: MARSHA REECE MGR 05/01/2008