

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000085944

Entity Name: MAIDA VALE MUSIC, LLC

FILED
May 12, 2009
Secretary of State

Current Principal Place of Business:

1900 CENTRE POINTE #284
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

1900 CENTRE POINTE #284
TALLAHASSEE, FL 32308

New Mailing Address:

FEI Number: 80-0286079 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:

VANTURE, CHARLES
232 E 5TH AVE.
TALLAHASSEE, FL 32303 US

Name and Address of New Registered Agent:

VANTURE, CHARLES E
232 E 5TH AVE.
TALLAHASSEE, FL 32303 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: CHARLES VANTURE

05/12/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CASE, ERIC
Address: 1900 CENTRE POINTE #284
City-St-Zip: TALLAHASSEE, FL 32308

Title: MGRM () Delete
Name: BARFIELD, JUSTIN
Address: 1500 N JEFFERSON ST.
City-St-Zip: MONTICELLO, FL 32344

Title: MGRM () Delete
Name: LEE, NATHAN
Address: 1111 E 6TH AVE.
City-St-Zip: TALLAHASSEE, FL 32303

Title: MGRM () Delete
Name: FRUIT, JOSH
Address: 4304 CARNWATH RD
City-St-Zip: TALLAHASSEE, FL 32303

Title: MGRM () Delete
Name: GLAZE, STRATTON
Address: 3792 E MILLERS BRIDGE RD
City-St-Zip: TALLAHASSEE, FL 32312

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:

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: ERIC CASE

MGRM

05/12/2009

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