

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000115520

**FILED**  
**Jan 07, 2015**  
**Secretary of State**  
**CC0141909074**

**Entity Name:** GRANT LARSON PRODUCTIONS, LLC

**Current Principal Place of Business:**

707 TEAL AVE  
CELEBRATION, FL 34747

**Current Mailing Address:**

1762 NORCROSS RD  
ERIE, PA 16510 US

**FEI Number:** 45-3677849

**Certificate of Status Desired:** No

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

LARSON, MARY A  
707 TEAL AVE  
CELEBRATION, FL 34747 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGRM	Title	MGRM
Name	LARSON, TIMOTHY R	Name	LARSON, MARY A
Address	1762 NORCROSS RD	Address	1762 NORCROSS RD
City-State-Zip:	ERIE PA 16510	City-State-Zip:	ERIE PA 16510
Title	MGRM		
Name	LARSON, CARLY J		
Address	172 W PROVIDENCIA AVE UNIT 101		
City-State-Zip:	BURBANK CA 91502		

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** TIMOTHY R. LARSON

**MGRM**

**01/07/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date