

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000066805

**Entity Name:** SONIC BOOM BAND, LLC

**Current Principal Place of Business:**

66 DANS DRIVE  
CRAWFORDVILLE, FL 32327

**Current Mailing Address:**

66 DANS DRIVE  
CRAWFORDVILLE, FL 32327 US

**FEI Number:** 47-3840935

**Certificate of Status Desired:** No

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

DAVIS, MCKENNEY J III  
66 DANS DRIVE  
CRAWFORDVILLE, FL 32327 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 AMBR  
Name DAVIS, MCKENNEY J III  
Address 66 DANS DRIVE  
City-State-Zip: CRAWFORDVILLE FL 32327

Title AMBR  
Name COLLINS, CARLTON  
Address 66 DANS DRIVE  
City-State-Zip: CRAWFORDVILLE FL 32327

Title AMBR  
Name MORGAN, JOSEPH  
Address 66 DANS DRIVE  
City-State-Zip: CRAWFORDVILLE FL 32327

Title AMBR  
Name CURVEY, THOMAS  
Address 66 DANS DRIVE  
City-State-Zip: CRAWFORDVILLE FL 32327

Title AMBR  
Name BLOODWORTH, ROBERT  
Address 66 DANS DRIVE  
City-State-Zip: CRAWFORDVILLE FL 32327

*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:** MCKENNEY J. DAVIS III

**MEMBER**

**04/21/2016**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date