

2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M13000006450

Entity Name: CKN THEATRES, LLC

Current Principal Place of Business:

9111 CROSS PARK DR
STE E275
KNOXVILLE, TN 37923

FILED
Apr 20, 2015
Secretary of State
CC1104618224

Current Mailing Address:

9111 CROSS PARK DR
STE E275
KNOXVILLE, TN 37923 US

FEI Number: 46-3766629

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INCorp SERVICES, INC.
17888 67TH CT NORTH
LOXAHATCHEE, FL 33470 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 MGR
Name ZACHERETTI, PHILIP J
Address 9111 CROSS PARK DR - STE E275
City-State-Zip: KNOXVILLE TN 37923

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: PHILIP J ZACHERETTI

MANAGER

04/20/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date