

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000009797

FILED
Jun 08, 2008
Secretary of State

Entity Name: CUSTOM ENTERTAINMENT PROPERTIES LLC

Current Principal Place of Business:

10940 SW FALL CREEK DRIVE
PORT ST LUCIE, FL 34987

New Principal Place of Business:

Current Mailing Address:

10940 SW FALL CREEK DRIVE
PORT ST LUCIE, FL 34987

New Mailing Address:

FEI Number: 65-1111872 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:

ERIC, JOEL
10940 SW FALL CREEK DRIVE
PORT ST LUCIE, FL 34987 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

MANAGING MEMBERS/MANAGERS:

Title: PRES () Delete
Name: ERIC, JOEL PRES
Address: 10940 SW FALL CREEK DRIVE
City-St-Zip: PORT SAINT LUCIE, FL 34987

Title: VP () Delete
Name: PASSARETTI, JOHN VP
Address: 1526 MINORCA AVENUE
City-St-Zip: PORT SAINT LUCIE, FL 34952

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: ERIC, LORI P VP
Address: 10940 SW FALL CREEK DRIVE
City-St-Zip: PORT SAINT LUCIE, FL 34987

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: JOEL ERIC

PRES

06/08/2008

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