

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000015005

Entity Name: HA PRODUCTIONS, LLC

FILED  
Feb 03, 2005  
Secretary of State

**Current Principal Place of Business:**

1543 S. HIGHLAND AVENUE, #299  
CLEARWATER, FL 33756

**New Principal Place of Business:**

1410 REGAL ROAD  
CLEARWATER, FL 33756

**Current Mailing Address:**

1543 S. HIGHLAND AVENUE, #299  
CLEARWATER, FL 33756

**New Mailing Address:**

1404 REGAL ROAD  
CLEARWATER, FL 33756

FEI Number: 59-3757938

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RODER, STEPHNEY  
1404 REGAL ROAD  
CLEARWATER, FL 33758 US

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

RODER, STEPHNEY  
1404 REGAL ROAD  
CLEARWATER, FL 33756 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: STEPHNEY A RODER

02/03/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: RODER, STEPHNEY  
Address: 1404 REGAL ROAD  
City-St-Zip: CLEARWATER, FL 33756

Title: MGR ( ) Delete  
Name: RODER, ROBERT  
Address: 1404 REGAL ROAD  
City-St-Zip: CLEARWATER, FL 33756

**ADDITIONS/CHANGES:**

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 for the exemption stated in Section 119.07(3)(i), 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: STEPHNEY A. RODER

MRS.

02/03/2005

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