

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 22, 2002 8:00 am
Secretary of State

04-22-2002 90225 003 ****50.00

DOCUMENT # L01000017401

1. Entity Name
WALM ENTERTAINMENT, LLC

Principal Place of Business
**116 POWELL BLVD.
 SUITE 5204
 DAYTONA BEACH FL 32114**

Mailing Address
**116 POWELL BLVD.
 SUITE 5204
 DAYTONA BEACH FL 32114**

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
PO Box 730071
 Suite, Apt. #, etc.

City & State
 Zip - Country

City & State
Ormond Beach, FL
 Zip Country
32173-0071 USA

4. FEI Number **01-0562325**

Applied For
 Not Applicable

5. Certificate of Status Desired - **\$5.00 Additional Fee Required**



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**JACKSON, DAMION
 116 POWELL BLVD.
 SUITE 5204
 DAYTONA BEACH FL 32114**

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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

DATE **4/10/02**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State
Due By May 1, 2002

9. MANAGING MEMBERS / MANAGERS

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | <input type="checkbox"/> Delete |
|-------|-----------------|------------------|------------------------|---------------------------------|
| MGR | JACKSON, DAMION | 116 POWELL BLVD. | DAYTONA BEACH FL 32114 | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |

10. ADDITIONS / CHANGES

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
|----------------------|-----------------|----------------|-----------------------------|-------------------------------------|-----------------------------------|
| Vice President / MGR | Damion Jackson | PO Box 730071 | Ormond Beach, FL 32173-0071 | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Vice President / MGR | John Atanasoski | PO Box 730071 | Ormond Beach, FL 32173-0071 | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |

11. I hereby certify that the information supplied with this filing does not qualify 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 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:

DATE **4/10/02**

DAYTIME PHONE # **(386) 451-6465**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (9/01)

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