2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2006
Secretary of State

DOCUMENT# L02000003022

Entity Name: SILVER LINING STUDIOS, L.L.C.

Current Principal Place of Business:

3315 MAGGIE BLVD.
SUITE 100
ORLANDO, FL 32811

New Principal Place of Business:

Current Mailing Address:

3315 MAGGIE BLVD., SUITE 100
SUITE 100
ORLANDO, FL 32811

New Mailing Address:

FEI Number: 42-1529633 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

REECE, MARSHA D
1850 LONG POND DRIVE
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

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:	MGR	( ) Delete
Name:	BUSTIN' LOOSE PRODUC, TIONS, INC.	
Address:	1850 LONG POND DRIVE	
City-St-Zip:	LONGWOOD,, FL 32779 US	
Title:	MGR	( ) Delete
Name:	NETANE INTERNATIONAL, & ASSOCIATES	
Address:	6464 HIDDEN DALE AVE.	
City-St-Zip:	ORLANDO, FL 32819 US	
Title:	MGR	( ) Delete
Name:	WENDY'S KCDA PRODUCT, IONS	
Address:	9158 GREAT HERON CIRCLE	
City-St-Zip:	ORLANDO, FL 32836 US	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 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: MARSHA D. M. REECE PRES 04/30/2006

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