

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000009132

Entity Name: SECTOR 9 STUDIOS, LLC

FILED  
Feb 12, 2007  
Secretary of State

## Current Principal Place of Business:

12303 TWINKLING STAR PLACE  
RIVERVIEW, FL 33569

## New Principal Place of Business:

## Current Mailing Address:

12303 TWINKLING STAR PLACE  
RIVERVIEW, FL 33569

## New Mailing Address:

FEI Number: 33-1001517

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MATHEU, ALEX  
12303 TWINKLING STAR PLACE  
RIVERVIEW, FL 33569 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: MATHEU, ALEX  
Address: 12303 TWINKLING STAR PL  
City-St-Zip: RIVERVIEW, FL 33569

Title: MGR ( ) Delete  
Name: MATHEU, CRYSTAL  
Address: 12303 TWINKLING STAR PL  
City-St-Zip: RIVERVIEW, FL 33569

Title: MGR ( ) Delete  
Name: BANGERT, JASON  
Address: 632 RENAISSANCE POINTE APT 108  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: MGR ( ) Delete  
Name: BANGERT, COURTNEY  
Address: 632 RENAISSANCE POINTE APT 108  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: MGR ( ) Delete  
Name: TORO, DAVID  
Address: 13232 ROYAL GEORGE AVE  
City-St-Zip: ODESSA, FL 33556

Title: MGR ( ) Delete  
Name: COX, GEORGE  
Address: 9 1/2 W FIFTH STREET  
City-St-Zip: PARKVILLE, MO 64152

## ADDITIONS/CHANGES:

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

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

Title: MGR (X) Change ( ) Addition  
Name: BANGERT, JASON  
Address: 18305 SE NEWPORT WAY, APT L203  
City-St-Zip: ISSAQUAH, WA 98027

Title: MGR (X) Change ( ) Addition  
Name: BANGERT, COURTNEY  
Address: 18305 SE NEWPORT WAY, APT L203  
City-St-Zip: ISSAQUAH, WA 98027

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: CRYSTAL MATHEU

MGR

02/12/2007

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