2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000016016

City-St-Zip:

SARASOTA, FL 34233

Entity Name: ANIMAGUS DESIGN, LLC

FILED Apr 29, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1624 ALTON ROAD 4158 PRUDENCE DR SARASOTA, FL 34235 VENICE, FL 34293 **Current Mailing Address: New Mailing Address:** 1624 ALTON ROAD 4158 PRUDENCE DR VENICE, FL 34293 SARASOTA, FL 34235 FEI Number: 54-2064823 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: COVERSE, JAMES L VANDERSLUIS, DON 624 ALTON RD. 4158 PRUDENCE DR VENICE, FL 34293 US US SARASOTA, FL 34235 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: DON VANDERSLUIS 04/29/2008 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete CONVERSE, JAMES Name: Name: 1624 ALTON RD. Address: Address: City-St-Zip: VENICE, FL 34293 City-St-Zip: Title: MGRM Title: () Delete () Change () Addition PUCCIO, DAN Name: Name: Address: 1800 FLAMETREE LANE Address: City-St-Zip: VENICE, FL 34293 City-St-Zip: Title: MGR () Delete Title: MGRM (X) Change () Addition REYNOLDS, VINCE VANDER SLUIS, DON Name: Name: 1314 NW IRVING ST, #210 Address: Address: 4158 PRUDENCE DR. City-St-Zip: PORTLAND, OR 972092722 City-St-Zip: SARASOTA, FL 34235 Title: MGRM (X) Delete Title: () Change () Addition Name: VANDER SLUIS, DON Name: 4158 PRUDENCE DR. Address: Address: City-St-Zip: SARASOTA, FL 34235 City-St-Zip: Title: MGR (X) Delete Title: () Change () Addition ZACHARIASEN, LARS Name: Name: 5172 BIRCH AVE. Address: Address:

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.

City-St-Zip:

SIGNATURE: JAMES CONVERSE MGRM 04/29/2008