

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000018616

**FILED**  
**Apr 25, 2012**  
**Secretary of State**

**Entity Name:** DIGITAL MEDIA ARTS COLLEGE, LLC

**Current Principal Place of Business:**

5400 BROKEN SOUND BLVD.  
100  
BOCA RATON, FL 33487

**New Principal Place of Business:**

5400 BROKEN SOUND BLVD. NW  
100  
BOCA RATON, FL 33487

**Current Mailing Address:**

5400 BROKEN SOUND BLVD.  
100  
BOCA RATON, FL 33487

**New Mailing Address:**

5400 BROKEN SOUND BLVD. NW  
100  
BOCA RATON, FL 33487

**FEI Number:** 51-0416512

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MURVIN, DAVID  
5400 BROKEN SOUND BLVD.  
100  
BOCA RATON, FL 33487 US

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

MURVIN, DAVID  
5400 BROKEN SOUND BLVD. NW  
100  
BOCA RATON, FL 33487 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/25/2012

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: GIBBS, JOSEPH E  
Address: 5312 ISLEWORTH CC DRIVE  
City-St-Zip: WINDERMERE, FL 34786

I hereby 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: DAVID MURVIN

MGR

04/25/2012

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