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May 27, 2004 8:00 am
Secretary of State
04-23-2004 90016 015 ****55.00

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

4/7

34007655

DOCUMENT # L02000022194

1. Entity Name
LEISURE MEDIA, LC

Principal Place of Business	Mailing Address
11386 NE 113TH TERRACE FT. MCCOY, FL 32134	P.O. BOX 1256 OCALA, FL 34478

01262004 Chg-LLC CR2E063 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 22-3867231 ☐ Applied For
APPLIED FOR ☐ Not Applicable

5. Certificate of Status Desired ☒ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PATTERSON, WILLIAM F III 15699 N.E. 167TH LANE FT. MCCOY, FL 32134	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. I am familiar with, and accept the obligations of registered agent.

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

Filing Fee is $50.00
Due by May 1, 2004

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM PULLMAN, NORM 15699 NE 167TH LANE FT. MCCOY, FL 32134	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM, CEO, PRESIDENT PATTERSON, WILLIAM F. III 15699 NE 167TH LANE FT. MCCOY, FL 32134	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY Andasia M. Johns 15749 NE 152nd St. Ft. McCoy, FL 32134	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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 605, Florida Statutes.

SIGNATURE: William Patterson, WILLIAM F PATTERSON 4/22/04 (352) 236-0752
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #

Attachment

[redacted] 3/20/7653

#L02000022154

Please note the enclosed information.

PRESIDENT AND CEO
WILLIAM F. PATTERSON III
15699 NE 167th LN
FORT McCOY, FL 32134

SECRETARY
Anastasia M. Johns
15749 NE 152nd St
~~FORT McCOY, FL 32134~~

DIVISION OF CORPORATIONS
P.O. BOX 6478
Tallahassee, FL 32314

RE: Leisure Media, LC
11386 NE 113th Terrace
Fort McCoy, ~~FL~~ 32134