

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000033106

Entity Name: COBRA STUDIOS, LLC

**FILED**  
**Apr 12, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

1495 HAMPSTEAD COVE  
OVIEDO, FL 32765

**New Principal Place of Business:**

**Current Mailing Address:**

1495 HAMPSTEAD COVE  
OVIEDO, FL 32765

**New Mailing Address:**

FEI Number: 04-3731835

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RICHARDSON, SCOTT  
1495 HAMPSTEAD COVE  
OVIEDO, FL 32765 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  
Name: RICHARDSON, AARON C  
Address: 501 N. ORLANDO AV. #313  
City-St-Zip: ORLANDO, FL 32789

Title: MGR  
Name: RICHARDSON, SCOTT G  
Address: 1495 HAMPSTEAD COVE  
City-St-Zip: OVIEDO, FL 32765

Title: MGR  
Name: CARUSO, DEBORAH A  
Address: 1495 HEAMPSTED COVE  
City-St-Zip: OVIEDO, FL 32765

Title: MGR  
Name: WALKER, WAYNE  
Address: 3313 W HAWTHORNE RD  
City-St-Zip: TAMPA, FL 33611

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: SCOTT RICHARDSON

MGR

04/12/2010

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