

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 10, 2004 8:00 am
Secretary of State

08-10-2004 90051 001 ****50.00

DOCUMENT # L03000003162

1. Entity Name
DARKCHILD ENTERTAINMENT EAST, LLC



Principal Place of Business
4202 RANDY COURT
MAYS LANDING, NJ 08330

Mailing Address
4202 RANDY COURT
MAYS LANDING, NJ 08330

24079334



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07202004 Chg-LLC CR2E083 (10/03)

City & State

City & State

4. FEI Number
16-1650592

Applied For
Not Applicable

Zip

Country

Zip

Country

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

JERKINS, REV. FRED JR.
2984 ALATKA COURT
LONGWOD, FL 32779

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$50.00
Due by September 8, 2004

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE MGRM
NAME JERKINS, RODNEY
STREET ADDRESS 4202 RANDY COURT
CITY-ST-ZIP MAYS LANDING, NJ 08330 ☒ Delete

TITLE MGRM
NAME JERKINS, RODNEY
STREET ADDRESS 4202 RANDY COURT
CITY-ST-ZIP MAYS LANDING, NJ 08330 ☒ Change ☐ Addition

TITLE MGRM
NAME JERKINS, REV. FRED JR.
STREET ADDRESS 4202 RANDY COUR
CITY-ST-ZIP MAYS LANDING, NJ 08330 ☒ Delete

TITLE MGRM
NAME JERKINS FRED JR
STREET ADDRESS 2984 ALATKA COURT
CITY-ST-ZIP LONGWOOD FL 32779 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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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 608, Florida Statutes.

SIGNATURE: Rev. Fred Jerkins

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

8/2/04

Date

Daytime Phone #