

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000004394

Entity Name: VIDEO GIANT, LLC

FILED  
Apr 29, 2005  
Secretary of State

## Current Principal Place of Business:

2200 CR 210 WEST #305  
JACKSONVILLE, FL 32259

## New Principal Place of Business:

## Current Mailing Address:

2200 CR 210 WEST #305  
JACKSONVILLE, FL 32259

## New Mailing Address:

9838 OLD BAYMEADOWS RD 284  
JACKSONVILLE, FL 32256

FEI Number: 47-0002567

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROGERS, PAUL M  
2200 CR 210 WEST #305  
JACKSONVILLE, FL 32259 US

## Name and Address of New Registered Agent:

ROGERS, PAUL M  
9838 OLD BAYMEADOWS RD 284  
JACKSONVILLE, FL 32256 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:

04/29/2005

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete  
Name: ROGERS, PAUL  
Address: 8129 SABAL OAK LANE  
City-St-Zip: JACKSONVILLE, FL 32256

Title: MGRM ( ) Delete  
Name: ROGERS, ELIZABETH  
Address: 8129 SABAL OAK LANE  
City-St-Zip: JACKSONVILLE, FL 32256

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PAUL M. ROGERS

MGR

04/29/2005

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