

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90376 012 ****50.00

DOCUMENT # L03000015477

1. Entity Name
MULTICHANNEL VENTURES, LLC



Principal Place of Business
1000 UNIVERSAL STUDIOS PLAZA
BLDG 22-A
ORLANDO, FL 32819

Mailing Address
1000 UNIVERSAL STUDIOS PLAZA
BLDG 22-A
ORLANDO, FL 32819

DO NOT WRITE IN THIS SPACE



04292005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number
42-1589535

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

GERRITY, MICHAEL J
1000 UNIVERSAL STUDIOS PLAZA
BLDG 22-A
ORLANDO, FL 32819

**DO NOT WRITE
IN THIS SPACE**

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

President / Michael Gerrity

4/29/05

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 May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
GERRITY, MICHAEL
STREET ADDRESS
1000 UNIVERSAL STUDIOS PLAZA, BLDG 22-A
CITY-ST-ZIP
ORLANDO, FL 32819

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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:

President / Michael Gerrity

4/29/05

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

Date

Daytime Phone #

(407) 224-6847