

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000016667

**FILED**  
**Mar 26, 2009**  
**Secretary of State**

**Entity Name:** SAVOY ENTERTAINMENT PRODUCTIONS, L.L.C.

**Current Principal Place of Business:**

3000 SOUTH OCEAN BLVD  
SUITE 503  
PALM BEACH, FL 33480 US

**New Principal Place of Business:**

1650 SOUTH BRADLEY PLACE  
SUITE 613  
PALM BEACH, FL 33480 US

**Current Mailing Address:**

3000 SOUTH OCEAN BLVD  
SUITE 503  
PALM BEACH, FL 33480 US

**New Mailing Address:**

1650 SOUTH BRADLEY PLACE  
SUITE 613  
PALM BEACH, FL 33480 US

**FEI Number:** 73-1674172

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SYLVIA, SMITH  
3000 SOUTH OCEAN BLVD  
SUITE 503  
PALM BEACH, FL 33480 US

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

SYLVIA, SMITH  
1650 SOUTH BRADLEY PLACE  
SUITE 613  
PALM BEACH, FL 33480 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:

03/26/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: SMITH, SYLVIA  
Address: 3000 SOUTH OCEAN BLVD SUITE 503  
City-St-Zip: PALM BEACH, FL 33480 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: SMITH, SYLVIA  
Address: 1650 SOUTH BRADLEY PLACE, SUITE 613  
City-St-Zip: PALM BEACH, FL 33480 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: SYLVIA SMITH

MGRM

03/26/2009

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