

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000033799

FILED
Jul 01, 2005
Secretary of State

Entity Name: NAKED BONGOS LLC

Current Principal Place of Business:

220 14TH AVENUE NE
SAINT PETERSBURG, FL 33701

New Principal Place of Business:

Current Mailing Address:

220 14TH AVENUE NE
SAINT PETERSBURG, FL 33701

New Mailing Address:

FEI Number: 20-0203699 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

DEGROOT, NEIL P
220 14TH AVENUE NE
SAINT PETERSBURG, FL 33701 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WATERSHED ENTERTAINM, ENT HOLDINGS L L C
Address: 2711 CENTERVILLE ROAD, SUITE 400
City-St-Zip: WILMINGTON, DL 19808 US

Title: MGR () Delete
Name: DEGROOT, NEIL P
Address: 220 14TH AVENUE NE
City-St-Zip: ST. PETERSBURG, FL 33701 US

Title: MGR () Delete
Name: APTER, CYNTHIA F
Address: 11975 4TH STREET E
City-St-Zip: TREASURE ISLAND, FL 33706 US

Title: MGR () Delete
Name: DAVIS, LANCELOT D
Address: 4125 N. TOMSIK STREET
City-St-Zip: LAS VEGAS, NV 89129 US

Title: MGR () Delete
Name: RAMSAY, DONALD D
Address: 863 19TH AVENUE N
City-St-Zip: ST. PETERSBURG, FL 33704 US

Title: MGR () Delete
Name: DAVIS, CHRISTOPHER K
Address: P.O. BOX 76466
City-St-Zip: ST. PETERSBURG, FL 33734 US

ADDITIONS/CHANGES:

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

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

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

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

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: NEIL P. DEGROOT

MGR

07/01/2005

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