## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L03000051732

Entity Name: GENXSIS PRODUCTIONS LLC

OKLAHOMA CITY, OK 73116 US

City-St-Zip:

FILED Jun 08, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3609 SE 33RD COURT OCALA, FL 34471 **Current Mailing Address: New Mailing Address:** 3609 SE 33RD COURT OCALA, FL 34471 FEI Number: 20-0441722 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: STRONG, SHAWNEE 3609 SE 33RD COURT OCALA, FL 34471 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/MEMBERS: ADDITIONS/CHANGES:** MGR () Change () Addition () Delete STRONG, JOHN Name: Name: 3609 SE 33RD COURT Address: Address: City-St-Zip: OCALA, FL 34471 US City-St-Zip: Title: MGR ( ) Delete Title: () Change () Addition Name: JONES, DARRIN Name: Address: 4235 SE 17TH LANE Address: City-St-Zip: OCALA, FL 34472 US City-St-Zip: Title: MGR () Delete Title: () Change () Addition STRONG, BRAD Name: Name: Address: 28 PECAN RUN HARBOR Address: City-St-Zip: OCALA, FL 34472 US City-St-Zip: Title: MGR ( ) Delete Title: () Change () Addition Name: STRONG, SHAWNEE Name: 3609 SE 33RD COURT Address: Address: City-St-Zip: OCALA, FL 34471 US City-St-Zip: Title: MGR ( ) Delete Title: () Change () Addition OPITZ, PHILIP Name: Name: 6812 EDGEWATER DRIVE Address: Address:

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.

City-St-Zip:

SIGNATURE: DARRIN JONES MGR 06/08/2004