

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000012363

Entity Name: IRONFISH CREATIVE LLC

FILED  
Jan 02, 2008  
Secretary of State

**Current Principal Place of Business:**

2012 CHARRWOOD WAY  
MARIETTA, GA 30062 US

**New Principal Place of Business:**

**Current Mailing Address:**

2012 CHARRWOOD WAY  
MARIETTA, GA 30062 US

**New Mailing Address:**

FEI Number: 41-2126069

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MANULKIN, RICHARD J  
2809 MORNING GLORY LN  
DAVIE, FL 33328 US

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

CARPENTER, NANCY  
11583 NW 2ND STREET  
PLANTATION, FL 33325 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: NANCY CARPENTER

01/02/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: MANULKIN, RICHARD J  
Address: 2809 MORNING GLORY LN  
City-St-Zip: DAVIE, FL 33328

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: MANULKIN, RICHARD J  
Address: 2012 CHARRWOOD WAY  
City-St-Zip: MARIETTA, GA 30062

Title: MGR ( ) Change (X) Addition  
Name: MANULKIN, ALISA J  
Address: 2012 CHARRWOOD WAY  
City-St-Zip: MARIETTA, GA 30062

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: RICHARD MANULKIN

MGRM

01/02/2008

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