

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000022769

Entity Name: ACADEMY OF CINEMA LLC

**FILED**  
**Jan 05, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

3590 POINCIANA DRIVE  
MARGATE BLDG APT 511  
LAKE WORTH, FL 33467 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 540834  
LAKE WORTH, FL 33454 US

**New Mailing Address:**

FEI Number: 77-0627852

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NRAI SERVICES, INC.  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301 US

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

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  
Name: COHEN, NORMAN I  
Address: 3590 POINCIANAN DR, MARGATE BLDG APT 511  
City-St-Zip: LAKE WORTH, FL 33467 US

I hereby 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: NORMAN COHEN

MGRM

01/05/2012

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