FILED
Jun 13, 2005 8:00 am
Secretary of State
05-11-2005 90029 043 ***150.00
06-13-2005 90321 040 *****5.00

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000029034

1. Entity Name
WHITE BOYS RECORDS, LLC

Principal Place of Business	Mailing Address
5453 LAKE MARGARET DRIVE, UNIT J ORLANDO, FL 32812	5453 LAKE MARGARET DRIVE, UNIT J ORLANDO, FL 32812

05052005 Chg-LLC CR2E083 (10/03)

2. Principal Place of Business		3. Mailing Address	
5453 LK. MARGARET Dr.		SAME	
Suite, Apt. #, etc. UNIT J		Suite, Apt. #, etc.	
City & State ORLANDO, FL		City & State	
Zip 32812	Country USA	Zip	Country

4. FEI Number 52-2264594 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MOORE, MICHAEL L ESQ 640 NORTH HILLSIDE AVENUE ORLANDO, FL 32803	Name SAME Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE [signature] Michael L. Moore DATE 6-1-05

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by September 7, 2005

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WHITE, BRENDA 5453 LAKE MARGARET DRIVE, UNIT J ORLANDO, FL 32812	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify 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 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: Brenda White 5/24/05 (407) 208-9972

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #