

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000031441

Entity Name: PHUNKSTOCK, LLC

FILED
May 14, 2008
Secretary of State

Current Principal Place of Business:

1018 TRUMAN AVE
APT #3
KEY WEST, FL 33040

New Principal Place of Business:

1424 NEWTON STREET
APT #A
KEY WEST, FL 33040

Current Mailing Address:

P O BOX 401
KEY WEST, FL 33041

New Mailing Address:

FEI Number: 20-1070139 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:

MERRITT, DANIEL B
1018 TRUMAN AVENUE
APT #3
KEY WEST, FL 33040 US

Name and Address of New Registered Agent:

MERRITT, DANIEL B
1424 NEWTON STREET
APT A
KEY WEST, FL 33040 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:

05/14/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MERRITT, DANIEL
Address: 1018 TRUMAN AVENUE
City-St-Zip: KEY WEST, FL 33040

Title: MGRM () Delete
Name: DONOHUE, JOHN D
Address: 1501 LEON STREET
City-St-Zip: KEY WEST, FL 33040

Title: MGRM () Delete
Name: EK, JESPER
Address: 68 SANDS ROAD
City-St-Zip: BIG PINE KEY, FL 33043

Title: MGRM () Delete
Name: MERRITT, TIMOTHY S
Address: 4425 149TH AVENUE NORTH WEST
City-St-Zip: ANDOVER, MN 55304

Title: MGRM () Delete
Name: EK, VICTOR
Address: POSTILJONSVAGEN 36
City-St-Zip: ENSKEDE, NA S-122 SE

Title: MGRM () Delete
Name: EK, JACOB RASMUS
Address: ROSENKALLAVAGEN 6
City-St-Zip: NYKOPING, NA S-611 SE

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MERRITT, DANIEL
Address: 1424 NEWTON STREET, APT A
City-St-Zip: KEY WEST, FL 33040

Title: MGRM (X) Change () Addition
Name: DONOHUE, JOHN D
Address: 525 CAROLINE STREET
City-St-Zip: KEY WEST, FL 33040

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 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: DANIEL MERRITT

MGRM

05/14/2008

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