

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000032070

**FILED**  
**Feb 25, 2009**  
**Secretary of State**

**Entity Name:** TEACHER MASTER CHAMPION PRODUCTIONS, LLC

**Current Principal Place of Business:**

10251 METRO PARKWAY  
#116  
FT MYERS, FL 33966

**New Principal Place of Business:**

8359 BEACON BLVD  
#322  
FT MYERS, FL 33907

**Current Mailing Address:**

10251 METRO PARKWAY  
#116  
FT MYERS, FL 33966

**New Mailing Address:**

8359 BEACON BLVD  
#322  
FT MYERS, FL 33907

**FEI Number:** 20-1049397      **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:**

CRUMPACKER, ANNECHRISTINA  
10251 METRO PARKWAY  
#116  
FT MYERS, FL 33912 US

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

CRUMPACKER, ANNECHRISTINA  
8359 BEACON BLVD  
#322  
FT MYERS, FL 33907 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:** ANNECHRISTINA CRUMPACKER

02/25/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM ( ) Delete  
**Name:** CRUMPACKER, ANNECHRISTINA  
**Address:** 10251 METRO PARKWAY #116  
**City-St-Zip:** FT MYERS, FL 33966 US

**Title:** MGRM ( ) Delete  
**Name:** VELAZQUEZ, CARLOS A  
**Address:** 10251 METRO PARKWAY, SUITE #116  
**City-St-Zip:** FT MYERS, FL 33966 US

**ADDITIONS/CHANGES:**

**Title:** MGRM (X) Change ( ) Addition  
**Name:** CRUMPACKER, ANNECHRISTINA  
**Address:** 8359 BEACON BLVD, #322  
**City-St-Zip:** FT MYERS, FL 33907 US

**Title:** MGRM (X) Change ( ) Addition  
**Name:** VELAZQUEZ, CARLOS A  
**Address:** 8359 BEACON BLVD, #322  
**City-St-Zip:** FT MYERS, FL 33907 US

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:** ANNECHRISTINA CRUMPACKER

MGRM

02/25/2009

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