## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## **DOCUMENT # L04000041708**

1. Entity Name

ENTÉRTAINMENT DESIGNERS' NETWORK, LLC



FILED Apr 09, 2007 08:00 A Secretary of State

Principal Place of Business

103 CR 532 C BUSHNELL, FL 33513 Mailing Address

P.O. BOX 1630 BUSHNELL, FL 33513



04052007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number Applied For Not Applied For Not Applicable

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

## DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

6. Name and Address of Current Registered Agent

BURCHILL, DUDLEY K 103 CR 532 C BUSHNELL, FL 33513

## DO NOT WRITE IN THIS SPACE

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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		(NOTE: Registered Agent signature required when reinstating)	DATÉ
Filing Fee is \$50.00 Due by May 1, 2007			
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BURCHILL, DUDLEY K 103 CR 532 C BUSHNELL, FL 33513		U00000696712
TITLE NAME STREET ADDRESS CITY-ST-ZIP			04/18/07-80009-015 55.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.			