

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000081649

Entity Name: VIDEO GAME DUNGEON, LLC

FILED  
Mar 19, 2009  
Secretary of State

**Current Principal Place of Business:**

26 MAGNOLIA CIRCLE  
ORMOND BEACH, FL 32174 US

**New Principal Place of Business:**

**Current Mailing Address:**

26 MAGNOLIA CIRCLE  
ORMOND BEACH, FL 32174 US

**New Mailing Address:**

FEI Number: 20-1858831      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BOLERJACK, DANIEL J  
42 SOUTH PENINSULA DRIVE  
DAYTONA BEACH, FL 32118 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: MGR ( ) Delete  
Name: KEELEY, GREG  
Address: 1145 SOUTHWINDS  
City-St-Zip: PORT ORANGE, FL 32129 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR ( ) Delete  
Name: KEELEY, TERRENCE  
Address: 26 MAGNOLIA CIRCLE  
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR ( ) Delete  
Name: KEELEY, MARY  
Address: 26 MAGNOLIA CIRCLE  
City-St-Zip: ORMOND BEACH, FL 32174 US

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: GREG KEELEY

MGR

03/19/2009

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