

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000089276

FILED
Apr 25, 2005
Secretary of State

Entity Name: LUNATIC FRINGE PRODUCTIONS, LLC

Current Principal Place of Business:

1401 NE 3RD AVENUE
FORT LAUDERDALE, FL 33304

New Principal Place of Business:

3444 NE 12TH AVENUE
OAKLAND PARK, FL 33304

Current Mailing Address:

1401 NE 3RD AVENUE
FORT LAUDERDALE, FL 33304

New Mailing Address:

3444 NE 12TH AVENUE
OAKLAND PARK, FL 33304

FEI Number: 20-1985626

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
660 E. JEFFERSON ST.
TALLAHASSEE, FL 32301 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/MEMBERS:

Title: MGRM () Delete
Name: DALTON, BRYNN
Address: 1401 NE 3RD AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: MGRM () Delete
Name: WELLES, ANNE
Address: 1586 NE 37TH STREET
City-St-Zip: OAKLAND PARK, FL 33334

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WELLES, ANNE
Address: 3444 NE 12TH AVENUE
City-St-Zip: OAKLAND PARK, FL 33334

Title: MGRM (X) Change () Addition
Name: DALTON, ERYNN
Address: 3444 NE 12TH AVENUE
City-St-Zip: OAKLAND PARK, FL 33334

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ERYNN DALTON

VIC

04/25/2005

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