

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000038747

FILED
Mar 12, 2007
Secretary of State

Entity Name: WHOZIEWHATSIT CREATIVE, LLC

Current Principal Place of Business:

17216 PANAMA CITY BEACH PKWY
PANAMA CITY BEACH, FL 32413

New Principal Place of Business:

180 ASH ST
SANTA ROSA BEACH, FL 32459

Current Mailing Address:

17216 PANAMA CITY BEACH PKWY
PANAMA CITY BEACH, FL 32413

New Mailing Address:

180 ASH ST
SANTA ROSA BEACH, FL 32459

FEI Number: 20-2738478

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PORATH, SHANNON L
56 SPIRES LANE
SUITE 16A
SANTA ROSA BEACH, FL 32459 US

Name and Address of New Registered Agent:

PARRISH, CALE
180 ASH ST
SANTA ROSA BEACH, FL 32459 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: CALE PARRISH

03/12/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PARRISH, CALE
Address: 180 ASH STREET
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: MGRM () Delete
Name: SMITH, LEIGH
Address: 360 DEFUNIAK STREET
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: MGRM (X) Delete
Name: HOLSTEAD, JAMES R
Address: 992 KIRKLEY CT
City-St-Zip: FORT WALTON BEACH, FL 32547

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: HOLSTEAD, JAMES R
Address: 212 SOUTHGATE DR
City-St-Zip: CRESTVIEW, FL 32539

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

I hereby certify that the information supplied with this filing does not qualify for the 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: CALE PARRISH

MGRM

03/12/2007

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