

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

5/1

FILED
Jun 15, 2006 8:00 am
Secretary of State

05-05-2006 90024 019 ****50.00

DOCUMENT # L05000042449

1. Entity Name
KWM ENTERTAINMENT, LLC



Principal Place of Business
**6224 14TH STREET W.
BRADENTON, FL 34207**

Mailing Address
**6224 14TH STREET W.
BRADENTON, FL 34207**

30010448



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04122006 Chg-LLC CR2E083 (11/05)

City & State

City & State

4. FEI Number
20-2783105

Applied For

Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**STEARNS WEAVER MILLER WEISSLER ALHADEFF &
SITTERSON, P.A. 150 WEST FLAGLER STREET, S
TE 2200 C/O CARLOS CANINO
MIAMI, FL 33130**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE ☐ Delete
NAME **Managing Member**
STREET ADDRESS **Cecil White**
CITY-ST-ZIP **2673 Monocacy Ford Rd.
Frederick, MD 21701**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **Managing Member**
STREET ADDRESS **Kevin White**
CITY-ST-ZIP **9327 Hillsborough Drive
Frederick, MD 21701**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **Managing Member**
STREET ADDRESS **Tim Conway**
CITY-ST-ZIP **901 Meadow Green Drive
Mount Airy, M.D.**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **Managing Member**
STREET ADDRESS **Ann White**
CITY-ST-ZIP **2673 Monocacy Ford Rd.
Frederick, MD 21701**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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.

SIGNATURE:

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

Date

Daytime Phone #

4/20/06 941-755-5505