

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000059530

FILED
Apr 14, 2008
Secretary of State

Entity Name: NAME BEE, LLC

Current Principal Place of Business:

5505 W. GRAY ST.
TAMPA, FL 33609

New Principal Place of Business:

5505 WEST GRAY STREET
TAMPA, FL 33609 US

Current Mailing Address:

5505 W. GRAY ST.
TAMPA, FL 33609

New Mailing Address:

5505 WEST GRAY STREET
TAMPA, FL 33609 US

FEI Number: 20-3007855

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LIESKE, NOAH S
568 NINTH STREET SOUTH
SUITE 202
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

YOUAKIM, SAM
5505 WEST GRAY STREET
TAMPA, FL 33609 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: SAM YOUAKIM

04/14/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SOLARES, SIGMUND J
Address: 568 NINTH STREET SOUTH SUITE 202
City-St-Zip: NAPLES, FL 34102

Title: MGR () Delete
Name: LIESKE, NOAH S
Address: 568 NINTH STREET SOUTH SUITE 202
City-St-Zip: NAPLES, FL 34102

Title: MGR (X) Delete
Name: SMITH, MATTHEW H
Address: 650 POYDRAS STREET SUITE 1150
City-St-Zip: NEW ORLEANS, LA 70130

Title: MGR (X) Delete
Name: GARDNER, MICHAEL H
Address: 3959 VAN DYKE ROAD SUITE 246
City-St-Zip: LUTZ, FL 33549

Title: MGR (X) Delete
Name: MOORE, WILLIAM D
Address: 509 BROADWELL DRIVE
City-St-Zip: NASHVILLE, TN 37220

ADDITIONS/CHANGES:

Title: MGRP (X) Change () Addition
Name: SOLARES, SIGMUND J
Address: 5505 WEST GRAY STREET
City-St-Zip: TAMPA, FL 33609 US

Title: M (X) Change () Addition
Name: THE PRODUCERS, INC.,
Address: 5505 WEST GRAY STREET
City-St-Zip: TAMPA, FL 33609 US

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

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

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: SIGMUND J SOLARES

MGRP

04/14/2008

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