

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000005209

FILED
Mar 13, 2008
Secretary of State

Entity Name: GREGORY KOHN PRODUCTIONS, LLC

Current Principal Place of Business:

2419 PROSPERITY BAY COURT
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

Current Mailing Address:

983 METROPOLITAN AVE
3L
BROOKLYN, NY 11211

New Mailing Address:

2419 PROSPERITY BAY COURT
PALM BEACH GARDENS, FL 33410

FEI Number: 20-4119872

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOHN, GREGORY T
983 METROPOLITAN AVE
3L
BROOKLYN, NY, FL 11211 US

Name and Address of New Registered Agent:

KOHN, GREGORY T
2419 PROSPERITY BAY COURT
PALM BEACH GARDENS, FL 33410 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:

03/13/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: KOHN, GREGORY T
Address: 983 METROPOLITAN AVE, APT. 3L
City-St-Zip: BROOKLYN, NY 11211

Title: MGRM () Delete
Name: SELVIG, JOHN N IV
Address: 983 METROPOLITAN AVE, APT. 3L
City-St-Zip: BROOKLYN, NY 11211

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: KOHN, GREGORY T
Address: 120 S. 2ND ST. #6B
City-St-Zip: BROOKLYN, NY 11211

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: GREGORY T KOHN

MGR

03/13/2008

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