

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000017308

Entity Name: SUNBURST STUDIOS LLC

FILED  
Apr 16, 2007  
Secretary of State

## Current Principal Place of Business:

9901 ST. AUGUSTINE RD.  
JACKSONVILLE, FL 32257

## New Principal Place of Business:

9901 OLD ST. AUGUSTINE RD.  
JACKSONVILLE, FL 32257

## Current Mailing Address:

9901 ST. AUGUSTINE RD.  
JACKSONVILLE, FL 32257

## New Mailing Address:

9901 OLD ST. AUGUSTINE RD.  
JACKSONVILLE, FL 32257

FEI Number: 13-4319875

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HAMMER, GEORGE K  
9901 ST. AUGUSTINE RD.  
JACKSONVILLE, FL 32257 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/MANAGERS:

Title: MGRM ( ) Delete  
Name: WICKER, DAINEL J  
Address: 12567 ALADDIN RD  
City-St-Zip: JACKSONVILLE, FL 32223

Title: MGRM ( ) Delete  
Name: HAMMER, GEORGE K  
Address: 12371 FLYNN RD.  
City-St-Zip: JACKSONVILLE, FL 32223

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: WICKER, DANIEL J  
Address: 9901 OLD ST. AUGUSTINE RD  
City-St-Zip: JACKSONVILLE, FL 32257

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: GEORGE K HAMMER

MGRM

04/16/2007

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