2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000023467 _..

Entity Name
 SPIRIT CALLING PRODUCTIONS, LLC

SIGNATURE AND TYPED OR PRINTE



Apr 03, 2008 08:00 All Secretary of State

Daytime Phone #

Principal Place of Business

EO14 LOCINACON DOAD

5014 LOG WAGON ROAD OCOEE, FL 34761 Mailing Address

5014 LOG WAGON ROAD OCOEE, FL 34761



DO NOT WRITE IN THIS SPACE

03312008 No Chg-LLC CR2E083 (12/07)

4. FEI Number	 Applied For
57-1230361	Not Applicable
5. Certificate of Status Desired	\$5.00 Additional

6. Name and Address of Current Registered Agent

MOORE, MELISSA E 1703 WHITE AVENUE ORLANDO, FL 32806

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of chan tions of registered agent.	inging its registered office or registered agent, or both, in the State of Florida. It am fami	liar with, and accept
SIGNATURE.		(NOTE Registered Agent sonature required when reinstating) DATE	
	Signature, typed or printed name of registered agent and title if applicable		
FILE After May	NOW!!! FEE IS \$138.75 y 1, 2008 Fee will be \$538.75 ;	U00000279267 04/15/08-80011-021	138.75
9	, . MANAGING MEMBERS/MANAGERS		
NAME STREET ADDRESS CITY-ST-ZIP	MGR ELLIS, AMY B 5014 LOG WAGON ROAD OCOEE, FL 34761		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
HITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS			

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.

NAME OF BIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE