

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000030385

FILED
Apr 30, 2008
Secretary of State

Entity Name: JOURNEY 360 ENTERTAINMENT, LLC

Current Principal Place of Business:

2676 FLORENCE ST.
ORLANDO, FL 32818

New Principal Place of Business:

Current Mailing Address:

2676 FLORENCE ST.
ORLANDO, FL 32818

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MESSINA, SCOTT A
2037 WINTERMERE POINTE DRIVE
WINTER GARDEN, FL 34787 US

Name and Address of New Registered Agent:

MESSINA, SCOTT A
8724 ELLESMERE PLACE
ORLANDO, FL 32836 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:

04/30/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HART, JANET
Address: 2676 FLORENCE ST.
City-St-Zip: ORLANDO, FL 32818

Title: MGR () Delete
Name: MESSINA, SCOTT A
Address: 2037 WINTERMERE POINTE DRIVE
City-St-Zip: WINTER GARDEN, FL 34787

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: MESSINA, SCOTT A
Address: 8724 ELLESMERE PLACE
City-St-Zip: ORLANDO, FL 32836

Title: MGR () Change (X) Addition
Name: BACCHUS, KAMLA
Address: 13815 AMBERLEIGH ROAD
City-St-Zip: ORLANDO, FL 32837

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: JANET M. HART

MGRM

04/30/2008

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