

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000059932

Entity Name: TEAM PRODUCTIONS LLC

FILED  
Apr 08, 2009  
Secretary of State

**Current Principal Place of Business:**

533 SOUTH 5TH ST  
FORT PIERCE, FL 34950

**New Principal Place of Business:**

**Current Mailing Address:**

533 SOUTH 5TH ST  
FORT PIERCE, FL 34950

**New Mailing Address:**

FEI Number: 20-5027620

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ZURITA, LUIS X  
3295 SOUTH FEDERAL HIGHWAY US1  
FORT PIERCE, FL 34982 US

**Name and Address of New Registered Agent:**

ZURITA, LUIS X  
533 S 5TH STREET  
FORT PIERCE, FL 34950 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: LUIS ZURITA

04/08/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: ZURITA, LUIS X  
Address: 3295 SOUTH FEDERAL HWY US1  
City-St-Zip: FORT PIERCE, FL 34982

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: ZURITA, LUIS X  
Address: 533 S 5TH STREET  
City-St-Zip: FORT PIERCE, FL 34950

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: LUIS ZURITA

MGR

04/08/2009

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