2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000063215

Entity Name: ADIGITALVILLAGE.COM, LLC

FILED Apr 20, 2009 Secretary of State

US

() Change () Addition

Current Principal Place of Business: New Principal Place of Business:

201 PARK PLACE, STE 107

ALTAMONTE SPRINGS, FL 32701 US

Current Mailing Address: New Mailing Address:

201 PARK PLACE, STE 107

ALTAMONTE SPRINGS, FL 32701 US

FEI Number: 20-5090748 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ANDERSON, JOHN
4583 ST JOHNS PARKWAY
531

ALLIMAR CORPORATION
201 PARK PLACE, STE 107
ALTAMONTE SPRINGS, FL 32701

SANFORD, FL 32771 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.

ADDITIONS/CHANGES:

SIGNATURE: JOHN ANDERSON 04/20/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

MGRM Title: () Delete (X) Change () Addition ALLIMAR CORPORATION ALLIMAR CORPORATION Name: Name: 1795 ASTOR FARMS PL Address: 201 PARK PLACE, SUITE 107 Address: City-St-Zip: SANFORD, FL 32771 US City-St-Zip: ALTAMONTE SPRINGS, FL 32701 US

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: SN MANAGEMENT Name: SN MANAGEMENT Address: 513 5TH AVE S Address: 1624 PEBBLE CREEK DR.

City-St-Zip: SARTELL, MN 56377 US City-St-Zip: SARTELL, MN 56377 US

 Title:
 MGRM
 (X) Delete
 Title:

 Name:
 BANG WEB WORKS, INC.
 Name:

 Address:
 201 PARK PLACE, SUITE 108
 Address:

 City-St-Zip:
 ALTAMONTE SPRINGS, FL 32701
 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: JOHN ANDERSON MGRM 04/20/2009