

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000081136

FILED
Apr 28, 2008
Secretary of State

Entity Name: CENTER PIXEL, LLC

Current Principal Place of Business:

18840 US HEY 19N, SUITE 420
CLEARWATER, FL 33764 US

New Principal Place of Business:

18840 US HWY 19N, SUITE 420
CLEARWATER, FL 33764 US

Current Mailing Address:

18840 US HEY 19N, SUITE 420
CLEARWATER, FL 33764 US

New Mailing Address:

18840 US HWY 19N, SUITE 420
CLEARWATER, FL 33764 US

FEI Number: 20-5388209

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DANIELS, GILBERT C
18840 US HWY 19N, SUITE 420
CLEARWATER, FL 33764 US

Name and Address of New Registered Agent:

DANIELS, GILBERT C
4132 BOYD LANE
PALM HARBOR, FL 34685 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:

04/28/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: EIDSCHUN, CHARLES M
Address: 2333 FEATHER SOUND DR A311
City-St-Zip: CLEARWATER, FL 33762 US

Title: MGRM () Delete
Name: MORTON, ZACH
Address: 10862 109TH ST
City-St-Zip: LARGO, FL 33778

Title: MGRM () Delete
Name: GARDNER, MIKE
Address: 7780 49TH ST, PMB 303-C
City-St-Zip: PINELLAS PARK, FL 33781

Title: MGRM () Delete
Name: KRUG, NEAL
Address: 2692 ENTERPRISE RD., E#1201
City-St-Zip: CLEARWATER, FL 33759

Title: MGRM (X) Delete
Name: TROPIANO, VICTOR
Address: 15738 CEDAR ELM TER
City-St-Zip: LAND O LAKES, FL 34638

Title: MGRM (X) Delete
Name: DANIELS, GILBERT
Address: 4132 BOYD LANE
City-St-Zip: PALM HARBOR, FL 34685

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MORTON, ZACH
Address: 10862 109TH ST
City-St-Zip: LARGO, FL 33778 US

Title: MGRM (X) Change () Addition
Name: DANIELS, GILBERT C
Address: 4132 BOYD LANE
City-St-Zip: PALM HARBOR, FL 34685

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

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

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

Title: () Change () Addition
Name:
Address:
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: GILBERT C. DANIELS

MGRM

04/28/2008

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