

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

**FILED**  
**Apr 04, 2007 8:00 am**  
**Secretary of State**

04-04-2007 90038 025 \*\*\*\*50.00

DOCUMENT # L06000087281

1. Entity Name

RYON STUDIOS LLC



Principal Place of Business

Mailing Address

8637 BRISTOLWOOD CIRCLE  
NAVARRE FL 32566

8637 BRISTOLWOOD CIRCLE  
NAVARRE FL 32566

*Address Change*



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

9802 Redland Rd  
Suite, Apt. #, etc.

9802 Reedland Rd  
Suite, Apt. #, etc.

1st MOORE

CR2E083 (10/06)

City & State

City & State

Milton, FL

Milton, FL

4. FEI Number

20-5521891

Applied For

Not Applicable

Zip

Country

Zip

Country

32583

Santa Rosa

32583

Santa Rosa

5. Certificate of Status Desired ☐

\$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RYON, CHRISTOPHIR W  
8637 BRISTOLWOOD CIRCLE  
NAVARRE FL 32566

9802 Redland Rd  
Milton, FL 32583

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Christophir W. Ryon*

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

*CR Ryon 3/26/07*

**FILE NOW!!! FEE IS \$50.00**  
**Make Check Payable to Florida Department of State**  
**Due By May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
MGRM  
RYON, CHRISTOPHIR W  
8637 BRISTOLWOOD CIRCLE  
NAVARRE FL 32566 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
Change ☐ Addition  
9802 Redland Rd.  
Milton, FL 32583

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
MGRM  
RYON, CHELLISA K  
8637 BRISTOLWOOD CIRCLE  
NAVARRE FL 32566 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
Change ☐ Addition  
9802 Redland Rd.  
Milton, FL 32583

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

SIGNATURE:

*Chellisa K. Ryon*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

*2/10/06*

Date

Daytime Phone #