2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000089896

Entity Name: CATCHLIGHT STUDIOS LLC

FILED Apr 30, 2008 Secretary of State

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

1960 US1 SOUTH PMB 21

SAINT AUGUSTINE, FL 32086

Current Mailing Address: New Mailing Address:

1960 US1 SOUTH PMB 21

SAINT AUGUSTINE, FL 32086

FEI Number: 20-5534063 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:

CRIBBS, JAMES D

106 ANASTASIA LAKES DRIVE

CRIBBS, JAMES D

3464 KINGS RD SOUTH

SAINT AUGUSTINE, FL 32080 US SAINT AUGUSTINE, FL 32086 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: JAMES D CRIBBS 04/30/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

Name:CRIBBS, JAMES DName:CRIBBS, JAMES DAddress:106 ANASTASIA LAKES DRIVEAddress:3464 KINGS RD SOUTHCity-St-Zip:SAINT AUGUSTINE, FL 32080City-St-Zip:SAINT AUGUSTINE, FL 32086

Title: MGRM () Delete Title: MGRM (X) Change () Addition

Name:CRIBBS, NICOLE MName:CRIBBS, NICOLE MAddress:106 ANASTASIA LAKES DRIVEAddress:3464 KINGS RD SOUTHCity-St-Zip:SAINT AUGUSTINE, FL 32080City-St-Zip:SAINT AUGUSTINE, FL 32086

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: JAMES D CRIBBS MGRM 04/30/2008