

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000090468

Entity Name: BREEZE BROADCAST GROUP, LLC

FILED  
Apr 22, 2008  
Secretary of State

**Current Principal Place of Business:**

6583 BERRYHILL ROAD  
MILTON, FL 32570

**New Principal Place of Business:**

**Current Mailing Address:**

6583 BERRYHILL ROAD  
MILTON, FL 32570

**New Mailing Address:**

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

OF FULWOOD, THE BARON  
6583 BERRYHILL ROAD  
MILTON, FL 32570 US

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

OF FULWOOD, LADY SARAH  
1955 NE 208 TER  
MIAMI, FL 33179 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: LSOFF

04/22/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: OF FULWOOD, THE BARON  
Address: 6583 BERRYHILL ROAD  
City-St-Zip: MILTON, FL 32570

Title: MGR ( ) Delete  
Name: OF FULWOOD, THE BARONESS  
Address: 6583 BERRYHILL ROAD  
City-St-Zip: MILTON, FL 32570

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: OF FULWOOD, THE BARON  
Address: PO BOX 4066  
City-St-Zip: HALLANDALE, FL 33008

Title: MGR (X) Change ( ) Addition  
Name: OF FULWOOD, THE BARONESS  
Address: PO BOX 4066  
City-St-Zip: HALLANDALE, FL 33008

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: THE BARON OF FULWOOD

MNGR

04/22/2008

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