

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000098290

FILED  
Feb 04, 2009  
Secretary of State

Entity Name: BACKSTAGE BABES, LLC

## Current Principal Place of Business:

1060 PINELLAS BAYWAY  
#102  
TIERRA VERDE, FL 33715 US

## New Principal Place of Business:

## Current Mailing Address:

1060 PINELLAS BAYWAY  
#102  
TIERRA VERDE, FL 33715 US

## New Mailing Address:

FEI Number: 20-5750130

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

D'LOUGHY, JAMES D ESQUIRE  
2855 PGA BOULEVARD  
SUITE# 200  
PALM BEACH GARDENS, FL 33410 US

## Name and Address of New Registered Agent:

DAVID, STRICKLER  
1120 PINELLAS BAYWAY S.  
204  
ST. PETERSBURG, FL 33715 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: DAVID J. STRICKLER

02/04/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: FOLLETT, JULIE  
Address: 1060 PINELLAS BAYWAY #101  
City-St-Zip: TIERRA VERDE, FL 33715 US

Title: MGRM ( ) Delete  
Name: INGRAM, KAREN  
Address: 2450 CENTRAL AVE. #201  
City-St-Zip: SAINT PETERSBURG, FL 33712 FL

Title: MGRM ( ) Delete  
Name: HANVEY, MELISSA  
Address: 39954 CHERRY VALLEY BLVD.  
City-St-Zip: CHERRY VALLEY, CA 92223 US

## ADDITIONS/CHANGES:

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: JULES FOLLETT

MGR

02/04/2009

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