2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000009477

Entity Name: JOE BLOW PRODUCTIONS, LLC

FILED Apr 28, 2008 Secretary of State

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

2028 E. BEARSS AVE 9481 HIGHLAND OAK DRIVE

1116 1610

TAMPA, FL 33613 TAMPA, FL 33647

Current Mailing Address: New Mailing Address:

2028 E. BEARSS AVE PO BOX 17465
1116 TAMPA FL 33682

1116 TAMPA, FL 33682 TAMPA, FL 33613

FEI Number: 20-8316241 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:

BENT, NEDDROY E BENT, NEDDROY E

2028 É. BEARSS AVE 9481 HIGHLAND OAK DRIVE

1116 TAMPA, FL 33613 US 1116 TAMPA, FL 33647 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: ADDITIONS/CHANGES:

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

 Name:
 MCFARLANE, JAVAUN
 Name:

 Address:
 907 INNERGARY PLACE
 Address:

 City-St-Zip:
 VALRICO, FL 33594
 City-St-Zip:

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

 Name:
 WILLIAMS, GREGORY S
 Name:

 Address:
 11307 HEDGEMOORE DRIVE
 Address:

 City-St-Zip:
 TAMPA, FL 33624
 City-St-Zip:

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

 Name:
 BRIGHTMON, EDWIN J
 Name:

 Address:
 14517 PRISM CIRCLE APT 103
 Address:

 City-St-Zip:
 TAMPA, FL 33513
 City-St-Zip:

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

 Name:
 FLEMISTER, MARIO
 Name:

 Address:
 6014 S. 82ND ST.
 Address:

 City-St-Zip:
 TAMPA, FL 33619
 City-St-Zip:

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

 Name:
 BENT, NEDDROY E
 Name:
 BENT, NEDDROY E

 Address:
 2028 E. BEARSS AVE APT 1116
 Address:
 PO BOX 17465

 City-St-Zip:
 TAMPA, FL 33613
 City-St-Zip:
 TAMPA, FL 33682

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: NEDDROY BENT MGRM 04/28/2008