## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000016594

Entity Name: CARTOON EXPLOSION 01, LLC

FILED Apr 29, 2009 Secretary of State

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

606 FRONT STREET 177 LONGVIEW AVENUE CELEBRATION, FL 34747 US

Current Mailing Address: New Mailing Address:

606 FRONT STREET P O BOX 470171
CELEBRATION, FL 34747 CELEBRATION, FL 34747

FEI Number: 20-8434812 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:

MIGHTY MOJO STUDIOS

606 FRONT STREET

CELEBRATION, FL 34747 US

ITMCI BUSINESS SOLUTIONS

177 LONGVIEW AVENUE

CELEBRATION, FL 34747 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: STEVE LEICHNER 04/29/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

Name:EISSINMANN, IAKEName:ITMCI INMOTION, LLCAddress:1239 CELEBRATION AVENUEAddress:177 LONGVIEW AVECity-St-Zip:CELEBRATION, FL 34747City-St-Zip:CELEBRATION, FL 34747 US

Title: MGRM ( ) Delete Title: MGRM (X) Change ( ) Addition Name: GALLACHER, JOHN Name: GALLACHER, JOHN

Address: 4446 PHILADELPHIA CIRCLE Address: 4446 PHILADELPHIA CIRCLE City-St-Zip: KISSIMMEE, FL 34746 US

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: STEVE LEICHNER MGRM 04/29/2009