

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

08 APR -1 AM 10:38

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

000121765250  
04/01/08--01006--005 \*\*138.75



<b>DOCUMENT # L07000053605</b> 1. Entity Name VIDEOSHOWTO.COM LLC	
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Principal Place of Business 3308 WOODHILL DR. TALLAHASSEE, FL 32303	Mailing Address 3308 WOODHILL DR. TALLAHASSEE, FL 32303
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2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.	3. Mailing Address  Suite, Apt. #, etc.
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City & State  Zip                      Country	City & State  Zip                      Country
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04012008    Chg-LLC    CR2E083 (12/06)

4. FEI Number  Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$5.00** Additional Fee Required

**6. Name and Address of Current Registered Agent**

PARKER, JAMES  
3308 WOODHILL DR.  
TALLAHASSEE, FL 32303

**7. Name and Address of New Registered Agent**

Name \_\_\_\_\_  
 Street Address (P.O. Box Number is Not Acceptable) \_\_\_\_\_  
 City FL Zip Code \_\_\_\_\_

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

*JPC*

**Make check payable to  
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS		<input type="checkbox"/> Delete
TITLE	MGRM CLENNY, DUSTIN	<input type="checkbox"/>
NAME	3308 WOODHILL DR.	
STREET ADDRESS	TALLAHASSEE, FL 32303	
CITY-ST-ZIP		
TITLE	MGRM PARKER, JAMES	<input type="checkbox"/>
NAME	3308 WOODHILL DR.	
STREET ADDRESS	TALLAHASSEE, FL 32303	
CITY-ST-ZIP		
TITLE	MGRM MIDDLETON, STEPHEN	<input checked="" type="checkbox"/>
NAME	3308 WOODHILL DR.	
STREET ADDRESS	TALLAHASSEE, FL 32303	
CITY-ST-ZIP		
TITLE	MGRM OCCONNER, DEWEY	<input type="checkbox"/>
NAME	3308 WOODHILL DR.	
STREET ADDRESS	TALLAHASSEE, FL 32303	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

10. ADDITIONS/CHANGES		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
TITLE		<input type="checkbox"/>	<input type="checkbox"/>
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/>	<input type="checkbox"/>
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE	MGRM Stephen Crayton	<input checked="" type="checkbox"/>	<input type="checkbox"/>
NAME	3308 woodhill Drive		
STREET ADDRESS	Tall, FL, 32303		
CITY-ST-ZIP			
TITLE		<input type="checkbox"/>	<input type="checkbox"/>
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/>	<input type="checkbox"/>
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:** \_\_\_\_\_ Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE