

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000067660

FILED  
Jul 03, 2008  
Secretary of State

Entity Name: SHOWTIME TRANSPORTERS USA, LLC

**Current Principal Place of Business:**

50 BELLEWOOD CIRCLE  
ORMOND BEACH, FL 32176

**New Principal Place of Business:**

**Current Mailing Address:**

50 BELLEWOOD CIRCLE  
ORMOND BEACH, FL 32176

**New Mailing Address:**

FEI Number: 26-0433166      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

TUMBLESON, J DOYLE  
150 SOUTH PALMETTO AVENUE  
SUITE A  
DAYTONA BEACH, FL 32114 US

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

LYNN, TARA R  
50 BELLEWOOD CIRCLE  
ORMOND BEACH, FL 32176      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: TARA R LYNN

07/03/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: LYNN, TARA L  
Address: 50 BELLEWOOD CIRCLE  
City-St-Zip: ORMOND BEACH, FL 32176

Title: MGR      ( ) Delete  
Name: LYNN, SHAWN V  
Address: 50 BELLEWOOD CIRCLE  
City-St-Zip: ORMOND BEACH, FL 32176

**ADDITIONS/CHANGES:**

Title: MGR      (X) Change ( ) Addition  
Name: LYNN, TARA R  
Address: 50 BELLEWOOD CIRCLE  
City-St-Zip: ORMOND BEACH, FL 32176

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: TARA R LYNN

MGR

07/03/2008

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