

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000085894

Entity Name: ECLYPTIC MEDIA, LLC

**FILED**  
**Feb 09, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

8862 WINDSOR POINTE DR.  
ORLANDO, FL 32829

**New Principal Place of Business:**

649 N. MILLS AVE.  
ORLANDO, FL 32803

**Current Mailing Address:**

PO BOX 721703  
ORLANDO, FL 328721703

**New Mailing Address:**

649 N. MILLS AVE.  
ORLANDO, FL 32803

FEI Number: 30-0436985

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TRIPOLI, PHILIP C II  
8862 WINDSOR POINTE DR.  
ORLANDO, FL 32829 US

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

TRIPOLI, PHILIP C II  
2312 CORRINE DR.  
ORLANDO, FL 32803 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:

02/09/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: TRIPOLI, PHILIP C II  
Address: 2312 CORRINE DR.  
City-St-Zip: ORLANDO, FL 32803

I hereby 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: PHILIP C. TRIPOLI II

MGRM

02/09/2010

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