## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L07000091621

2445 EMPIRE AVENUE

MELBOURNE, FL 32934

Address:

City-St-Zip:

Entity Name: JUST MUSIC, LLC

FILED Mar 09, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2445 EMPIRE AVENUE MELBOURNE, FL 32934 **Current Mailing Address: New Mailing Address:** 2445 EMPIRE AVENUE MELBOURNE, FL 32934 FEI Number: 26-1229245 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: MEYERS, PETER E PARTNER 2445 EMPIRE AVENUE MELBOURNE, FL 329343 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete MEYERS, NADEZHDA Name: Name: Address: 2445 EMPIRE AVENUE Address: City-St-Zip: MELBOURNE, FL 32934 City-St-Zip: Title: MGR ( ) Delete Title: () Change () Addition Name: MEYERS, J. RAYMOND Name: Address: 2445 EMPIRE AVENUE Address: City-St-Zip: MELBOURNE, FL 32934 City-St-Zip: Title: () Delete Title: () Change () Addition MEYERS, PETER Name: Name: Address: 2445 EMPIRE AVENUE Address: City-St-Zip: MELBOURNE, FL 32934 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: MEYERS, NADEZHDA Name:

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.

Address:

City-St-Zip:

SIGNATURE: PETER E. MEYERS S 03/09/2009