

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000113549

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

**Entity Name:** NATE LARSON MEDIA LLC

**Current Principal Place of Business:**

10151 UNIVERSITY BLVD. #228  
ORLANDO, FL 32817

**New Principal Place of Business:**

10151 UNIVERSITY BLVD., #228  
ORLANDO, FL 32817

**Current Mailing Address:**

10151 UNIVERSITY BLVD. #228  
ORLANDO, FL 32817

**New Mailing Address:**

**FEI Number:** 26-1578170      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

LARSON, JEFFREY T  
1570 HANDLEMAN DRIVE  
OVIEDO, FL 32765 US

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

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:**

Title: CEO  
Name: LARSON, NATE  
Address: 10151 UNIVERSITY BLVD. #228  
City-St-Zip: ORLANDO, FL 32817

Title: MGRM  
Name: LARSON, TERRY  
Address: 10151 UNIVERSITY BLVD. #228  
City-St-Zip: ORLANDO, FL 32817

Title: CFO  
Name: LARSON, JEFFREY T  
Address: 10151 UNIVERSITY BLVD. #228  
City-St-Zip: ORLANDO, FL 32817

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: JEFFREY T LARSON

CFO

03/09/2010

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