

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000113549

Entity Name: NATE LARSON MEDIA LLC

**FILED**  
**Apr 25, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

10151 UNIVERSITY BLVD., #228  
ORLANDO, FL 32817

**New Principal Place of Business:**

**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:**

LARSON, JEFFREY T CFO  
1570 HANDLEMAN DRIVE  
OVIEDO, FL 32765 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: JEFFREY T LARSON

04/25/2011

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: TERRY H LARSON

MGR

04/25/2011

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