

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000118982

FILED
Apr 30, 2008
Secretary of State

Entity Name: DREADROCK ENTERTAINMENT, LLC

Current Principal Place of Business:

3501 AVENUE K
FORT PIERCE, FL 34947 US

New Principal Place of Business:

2562 SW MCDONALD STREET
PORT ST LUCIE, FL 34953 US

Current Mailing Address:

3501 AVENUE K
FORT PIERCE, FL 34947 US

New Mailing Address:

2562 SW MCDONALD STREET
PORT ST LUCIE, FL 34953 US

FEI Number: 26-1478793

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'HEARN, JAMES J
2466 NE 17TH COURT
JENSEN BEACH, FL 34957 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: MGR () Delete
Name: HENDERSON, REGINALD
Address: 3501 AVENUE K
City-St-Zip: FORT PIERCE, FL 34947 US

Title: MGR () Delete
Name: SINGLETON, HENRY L II
Address: 2562 SW MCDONALD STREET
City-St-Zip: PORT ST LUCIE, FL 34953 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR () Change (X) Addition
Name: BUSH, RICARDO
Address: 247 GLENHAVEN DRIVE
City-St-Zip: AMHERST, NY 14228 US

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: HENRY L SINGLETON, II

MGR

04/30/2008

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