2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000016300

Entity Name: LIMELIGHT PHOTOS, LLC

FILED Apr 27, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

11601 INNFIELDS DR. 421 NE 24TH AVE

ODESSA, FL 33556 POMPANO BEACH, FL 33062

Current Mailing Address: New Mailing Address:

11601 INNFIELDS DR. 421 NE 24TH AVE

ODESSA, FL 33556 POMPANO BEACH, FL 33062

FEI Number: 26-1971486 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:

BEDNAREK, ELZBIETA
11601 INNFIELDS DR.

BEDNAREK, ELZBIETA
421 NE 24TH AVE

ODESSA, FL 33556 US POMPANO BEACH, FL 33062 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: JASON RAVELING 04/27/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition

Name: BEDNAREK, ELZBIETA Name: BEDNAREK, ELZBIETA

 Address:
 11601 INNFIELDS DR.
 Address:
 421 NE 24TH AVE

 City-St-Zip:
 ODESSA, FL 33556
 City-St-Zip:
 POMPANO BEACH, FL 33062

Title: MGR () Delete Title: MGR (X) Change () Addition Name: RAVELING, JASON Name: RAVELING, JASON

Address: 11601 INNFIELDS DR. Address: 421 NE 24TH AVE

City-St-Zip: ODESSA, FL 33556 City-St-Zip: POMPANO BEACH, FL 33062

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: JASON RAVELING OWNE 04/27/2009