

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000032846

Entity Name: TALK N SPORTS, LLC

FILED  
May 21, 2009  
Secretary of State

## Current Principal Place of Business:

8546 W. HOMOSASSA TRAIL #2  
HOMOSASSA SPRINGS, FL 34448

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 305  
MULBERRY, FL 33860

## New Mailing Address:

8546 W. HOMOSASSA TRAIL #2  
HOMOSASSA SPRINGS, FL 34448

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

COX, BRUCE L  
8546 W. HOMOSASSA TRAIL #2  
HOMOSASSA SPRINGS, FL 34448 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: ADAMS, JAMES P  
Address: 805 AURORA LANE  
City-St-Zip: MARION, IL 62959

Title: MGRM ( ) Delete  
Name: HALL, JANET K  
Address: 7451 COLONIAL COURT  
City-St-Zip: SANFORD, FL 32771

Title: MGRM ( ) Delete  
Name: COX, BRUCE L  
Address: 8546 W. HOMOSASSA TRAIL #2  
City-St-Zip: HOMOSASSA SPRINGS, FL 34448

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

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: ADAMS, JAMES P  
Address: 805 AURORA LANE  
City-St-Zip: MARION, IL 62959

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

Title: MGR (X) Change ( ) Addition  
Name: COX, BRUCE L  
Address: 8546 W. HOMOSASSA TRAIL #2  
City-St-Zip: HOMOSASSA SPRINGS, FL 34448

Title: MGRM ( ) Change (X) Addition  
Name: TSE, FONG  
Address: 251 CASUDA CANYON DRIVE, UNIT C  
City-St-Zip: MONTEREY PARK, CA 91754

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: BRUCE L. COX

MGR

05/21/2009

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