

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000046003

**FILED**  
**Mar 21, 2011**  
**Secretary of State**

**Entity Name:** SHARED DRIVE MEDIA, LLC

**Current Principal Place of Business:**

800 LAUREL OAK DRIVE  
SUITE #600  
NAPLES, FL 34108 US

**New Principal Place of Business:**

**Current Mailing Address:**

800 LAUREL OAK DRIVE  
SUITE #600  
NAPLES, FL 34108 US

**New Mailing Address:**

**FEI Number:** 26-2756033

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GALBRAITH, BRAD A  
800 LAUREL OAK DRIVE  
SUITE #600  
NAPLES, FL 34108 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:** MGRM  
**Name:** GALBRAITH, BRAD A  
**Address:** 800 LAUREL OAK DRIVE #600  
**City-St-Zip:** NAPLES, FL 34108

**Title:** MGRM  
**Name:** PERRY, GREG  
**Address:** 6417 CARROLLTON AVENUE  
**City-St-Zip:** INDIANAPOLIS, IN 46220 US

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: BRAD A. GALBRAITH

ATTY

03/21/2011

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