

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000058751

Entity Name: GATOR VIDEO, LLC

FILED  
Mar 05, 2009  
Secretary of State

**Current Principal Place of Business:**

1117 MORGAN ROAD  
PORT ORANGE, FL 32129

**New Principal Place of Business:**

**Current Mailing Address:**

1117 MORGAN ROAD  
PORT ORANGE, FL 32129

**New Mailing Address:**

2279 S RIDGEWOOD AVENUE  
SOUTH DAYTONA, FL 32119

FEI Number: 26-2836015

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROSS-HUGHES, REBECCA S  
1117 MORGAN ROAD  
PORT ORANGE, FL 32129 US

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

TROUP, ROBERT G  
4343-A RIDGEWOOD AVEUNE  
PORT ORANGE, FL 32127 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: ROBERT G. TROUP

03/05/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: ROSS-HUGHES, REBECCA S  
Address: 1117 MORGAN ROAD  
City-St-Zip: PORT ORANGE, FL 32129

Title: MGR ( ) Delete  
Name: SIMMONS, DAVID M  
Address: 1117 MORGAN ROAD  
City-St-Zip: PORT ORANGE, FL 32129

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: HUGHES, DONALD L  
Address: 1117 MORGAN ROAD  
City-St-Zip: PORT ORANGE, FL 32129

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

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: DONALD L. HUGHES

MGR

03/05/2009

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