

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000063036

Entity Name: MY.CTV LLC

FILED
Jun 15, 2009
Secretary of State

Current Principal Place of Business:

17310 WEST APSHAWA RD.
CLERMONT, FL 34711

New Principal Place of Business:

Current Mailing Address:

17310 WEST APSHAWA RD.
CLERMONT, FL 34711

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
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:

Name and Address of New Registered Agent:

STAGGS, TAMMI L
380 S SR 434 STE 1004 #310
ALTAMONTE SPRINGS, FL 32714 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: STAGGS, MICHAEL M
Address: 380 S SR 434 STE 1004 #310
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: MGRM () Delete
Name: STAGGS, TAMMI L
Address: 380 S SR 434 STE 1004 #310
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: MGRM () Delete
Name: STAGGS, CHRISTOPHER M
Address: 17310 WEST APSHAWA RD.
City-St-Zip: CLERMONT, FL 34711

Title: MGRM () Delete
Name: STAGGS, MICHAEL TANNER
Address: 17310 WEST APSHAWA RD.
City-St-Zip: CLERMONT, FL 34711

Title: MGRM () Delete
Name: STAGGS, VINCENT CRUISE
Address: 17310 WEST APSHAWA RD.
City-St-Zip: CLERMONT, FL 34711

ADDITIONS/CHANGES:

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

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

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

Title: MGRM (X) Change () Addition
Name: STAGGS, MICHAEL T
Address: 17310 WEST APSHAWA RD.
City-St-Zip: CLERMONT, FL 34711

Title: MGRM (X) Change () Addition
Name: STAGGS, VINCENT C
Address: 17310 WEST APSHAWA RD.
City-St-Zip: CLERMONT, FL 34711

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: MICHAEL STAGGS

MGRM

06/15/2009

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