

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000073754

Entity Name: STUDIO 2X2 LLC

FILED  
Jun 16, 2009  
Secretary of State

**Current Principal Place of Business:**

493 SOMERSET BRIDGE ROAD  
SEAGROVE BEACH, FL 32459 US

**New Principal Place of Business:**

**Current Mailing Address:**

8201 JAMES STREET  
PANAMA CITY, FL 32404 US

**New Mailing Address:**

6727 SUNSET AVENUE  
PANAMA CITY BEACH, FL 32408 US

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:**

REGISTER, GREGORY D  
493 SOMERSET BRIDGE ROAD  
SEAGROVE BEACH, FL 32459 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: REGISTER, GREGORY D  
Address: 493 SOMERSET BRIDGE ROAD  
City-St-Zip: SEAGROVE BEACH, FL 32459 US

Title: MGRM ( ) Delete  
Name: COLEAL, NANCY M  
Address: 8201 JAMES STREET  
City-St-Zip: PANAMA CITY, FL 32404 US

**ADDITIONS/CHANGES:**

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

Title: MGRM (X) Change ( ) Addition  
Name: COLEAL, NANCY M  
Address: 6727 SUNSET AVENUE  
City-St-Zip: PANAMA CITY BEACH, FL 32408 US

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: NANCY M COLEAL

MS

06/16/2009

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