2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000083257

Entity Name: S & D PRODUCTIONS, LLC

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

110 E. BROWARD BOULEVARD **SUITE 1700** FORT LAUDERDALE, FL 33301

New Mailing Address: Current Mailing Address:

110 E. BROWARD BOULEVARD **SUITE 1700** FORT LAUDERDALE, FL 33301

FEI Number: 37-1577640 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

KNOX, KAREN PETERSON, SAMUEL

110 E. BROWARD BOULEVARD 110 E. BROWARD BOULEVARD **SUITE 1700** SUITE 1700

FORT LAUDERDALE, FL 33301 US FORT LAUDERDALE, FL 33301 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: SAMUEL PETERSON 04/30/2009

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: () Delete (X) Change () Addition PETERSON, SAMUEL Name: PETERSON, SAMUEL Name:

110 E. BROWARD BOULEVARD, SUITE 1700 Address: 110 E. BROWARD BOULEVARD, SUITE 1700 Address:

City-St-Zip: FORT LAUDERDALE, FL 33301 City-St-Zip: FORT LAUDERDALE, FL 33301

(X) Change () Addition Title: MGR () Delete Title: MGRM

Name: JOHNSON, DARIUS Name: JOHNSON, DARIUS

Address: 110 E. BROWARD BOULEVARD, SUITE 1700 Address: 110 E. BROWARD BOULEVARD, SUITE 1700

City-St-Zip: FORT LAUDERDALE, FL 33301 City-St-Zip: FORT LAUDERDALE, FL 33301

Title: MGR () Delete Title: () Change () Addition

KNOX, KAREN Name: Name: 110 E. BROWARD BOULEVARD, SUITE 1700 Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33301 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: SAMUEL PETERSON **MGRM** 04/30/2009