

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000083607

Entity Name: BLUE COLLAR FILMS, LLC

FILED  
May 01, 2011  
Secretary of State

**Current Principal Place of Business:**

2265 LELAND LN  
CASSELBERRY, FL 32707

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 140141  
ORLANDO, FL 32814

**New Mailing Address:**

PO BOX 301174  
FERN PARK, FL 32730

FEI Number: 26-3481469

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MAMULA, MATT  
2265 LELAND LN  
CASSELBERRY, FL 32707 US

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

MAMULA, MATT  
2265 LELAND LN  
CASSELBERRY, FL 32730 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: MATT MAMULA

05/01/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: MAMULA, MATT  
Address: 2265 LELAND LN  
City-St-Zip: CASSELBERRY, FL 32707

Title: MGRM  
Name: KOVACSEV, JASON  
Address: 818 PALM FOREST LN  
City-St-Zip: MINNEOLA, FL 34715

Title: MGRM  
Name: HESS, JARED  
Address: 13214 HEMING WAY  
City-St-Zip: ORLANDO, FL 32825

Title: MGRM  
Name: SCHAUB, JOHN  
Address: 1984 THE OAKS BLVD.  
City-St-Zip: KISSIMMEE, FL 34746

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: MATT MAMULA

MGRM

05/01/2011

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