

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000086528

FILED
Aug 03, 2009
Secretary of State

Entity Name: STORYTELLER GAME, LLC

Current Principal Place of Business:

5131 GRAMONT AVENUE
ORLANDO, FL 32812 US

New Principal Place of Business:

Current Mailing Address:

5131 GRAMONT AVENUE
ORLANDO, FL 32812 US

New Mailing Address:

FEI Number: 26-3386820 FEI Number Applied For () FEI Number Not Applicable () 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:

SPRINGEN, DANIEL E
5131 GRAMONT AVENUE
ORLANDO, FL 32812 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: MGRM () Delete
Name: SPRINGEN, DANIEL E
Address: 5131 GRAMONT AVENUE
City-St-Zip: ORLANDO, FL 32812 US

Title: MGRM () Delete
Name: STEFANESCU, MIKK
Address: 5131 GRAMONT AVENUE
City-St-Zip: ORLANDO, FL 32812 US

ADDITIONS/CHANGES:

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

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: DANIEL E. SPRINGEN

MR.

08/03/2009

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