

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L08000095400

FILED
Jun 12, 2009
Secretary of State**Entity Name:** ELECTRIC MADNESS LLC**Current Principal Place of Business:**663 HARLOD AVE.
SUITE C
WINTER PARK, FL 32789**New Principal Place of Business:****Current Mailing Address:**663 HARLOD AVE.
SUITE C
WINTER PARK, FL 32789**New Mailing Address:****FEI Number:** 26-3607460**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**VEIGLE, TOREN J
663 HAROLD AVE
SUITE C
WINTER PARK, FL 32789 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: VEIGLE, TOREN J
Address: 663 HAROLD AVE
City-St-Zip: WINTER PARK, FL 32789**Title:** MGR () Delete
Name: CLAXTON, JEROME M
Address: 663 HAROLD AVE STE C
City-St-Zip: WINTER PARK, FL 32789**ADDITIONS/CHANGES:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** MGR (X) Change () Addition
Name: VEIGLE, LINDSEY A
Address: 663 HAROLD AVE STE C
City-St-Zip: WINTER PARK, FL 32789

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: TOREN VEIGLE

MGRM

06/12/2009

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