2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000097623

Entity Name: EXTRA MEDIUM PRODUCTIONS LLC

FILED Apr 08, 2009 Secretary of State

Current Principal Place of Business:					New Principal Place of Business:		
	RY STREET BEACH, FL	32266					
Current Mailing Address:					New Mailing Address:		
	RY STREET BEACH, FL						
FEI Number:	26-3571288	FEI Nun	nber Applied For()	FEI Num	ber Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of	Current R	egistered Agent:		Name and Address	of New Registered Agent:	
	CHRIS RY STREET BEACH, FL		US				
	named entity of Florida.	/ submits tl	nis statement for the pu	urpose of	changing its registere	ed office or registered agent, or both,	
SIGNATUR	RE:						
	Electro	onic Signat	ure of Registered Ager	nt		Date	
MANAGING MEMBERS/MANAGERS:					ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	MGRM (POLAND, CHI 700 CHERRY NEPTUNE BE	STREET	266		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM (NIELSEN, GR 5538 DUKE R JACKSONVIL	ROAD	17		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM (JORDAN, CAI 10075 GATE JACKSONVIL	PARKWAY N			Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	BYRD, JEFF 94 ARMOUR				Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM (STARR, JAME 13479 STONE JACKSONVIL	E POND DR	4		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM (JOHNSON, JA 421 W CHUR JACKSONVIL	CH ST LOFT			Title: Name: Address: City-St-Zip:	() Change () Addition	

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: CHRIS POLAND MGRM 04/08/2009