

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000106337

FILED
Jul 21, 2009
Secretary of State

Entity Name: ARTC EVENTS, LLC

Current Principal Place of Business:

1982 STATE ROAD 44
SUITE 322
NEW SMYRNA BEACH, FL 32168

New Principal Place of Business:

Current Mailing Address:

1982 STATE ROAD 44
SUITE 322
NEW SMYRNA BEACH, FL 32168

New Mailing Address:

FEI Number: 26-3726264 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:

CESERY L. BULLARD, P.A.
390 NORTH ORANGE AVENUE
SUITE 2300
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

TASELL, MICHELE S
3323 VICTORY PALM DR.
EDGEWATER, FL 32141 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: MICHELE S. TASELL

07/21/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: TASELL, MICHELE
Address: 1982 STATE ROAD 44, SUITE 322
City-St-Zip: NEW SMYRNA BEACH, FL 32168 US

Title: MGR () Delete
Name: TASELL, CANDACE
Address: 1982 STATE ROAD 44, SUITE 322
City-St-Zip: NEW SMYRNA BEACH, FL 32168 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: MICHELE S. TASELL

MGR

07/21/2009

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