

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000085836

FILED  
Mar 14, 2012  
Secretary of State

**Entity Name:** WILD BROTHER'S PRODUCTIONS L.L.C.

## Current Principal Place of Business:

MICHAEL & ELIZABETH WILD  
1118 PIN OAK CIRCLE  
NICEVILLE, FL 32578

## New Principal Place of Business:

MICHAEL & ELIZABETH WILD  
816 WEEDEN ISLAND DR  
NICEVILLE, FL 32578 US

## Current Mailing Address:

MICHAEL & ELIZABETH WILD  
1118 PIN OAK CIRCLE  
NICEVILLE, FL 32578

## New Mailing Address:

MICHAEL & ELIZABETH WILD  
816 WEEDEN ISLAND DR  
NICEVILLE, FL 32578 US

FEI Number: 45-2877084

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WILD, SR., MICHAEL J  
1132 PIN OAK CIRCLE  
NICEVILLE, FL 32578 US

## Name and Address of New Registered Agent:

WILD, SR., MICHAEL J  
816 WEEDEN ISLAND DR  
NICEVILLE, FL 32578 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:

03/14/2012

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR  
Name: WILD, JR., MICHAEL  
Address: 816 WEEDEN ISLAND DR  
City-St-Zip: NICEVILLE, FL 32578 US

Title: MGRM  
Name: WILD, ELIZABETH  
Address: 816 WEEDEN ISLAND DR  
City-St-Zip: NICEVILLE, FL 32578 US

Title: MGRM  
Name: WILD, SR, MICHAEL J  
Address: 816 WEEDEN ISLAND DR  
City-St-Zip: NICEVILLE, FL 32578 US

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: MICHAEL J. WILD

MGRM

03/14/2012

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