

# **2012 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L11000107777

**FILED**  
**May 04, 2012**  
**Secretary of State**

**Entity Name:** TEAM Z ENTERTAINMENT, LLC

**Current Principal Place of Business:**

12844 CAPTIVA COURT  
JACKSONVILLE, FL 32225

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 350111  
JACKSONVILLE, FL 32225

**New Mailing Address:**

**FEI Number:** 45-4311601

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

J. RILEY WILLIAMS, PLC  
2141 PARK STREET  
JACKSONVILLE, FL 32204 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  
Name: ZORN, LAURA  
Address: PO BOX 350111  
City-St-Zip: JACKSONVILLE, FL 32225

Title: MGRM  
Name: ZORN, DAVID S  
Address: PO BOX 350111  
City-St-Zip: JACKSONVILLE, FL 32225

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: DAVID S. ZORN

MGRM

05/04/2012

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