## 2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

## DOCUMENT# L98000000470

Entity Name: FLY OVER, L.C.

FILED Aug 10, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

406 N.E. 5TH AVENUE 227 WESTMINISTER DR. GAINESVILLE, FL 32601 TALLAHASSEE, FL 32304

Current Mailing Address: New Mailing Address:

406 N.E. 5TH AVENUE 227 WESTMINISTER DR. GAINESVILLE, FL 32601 TALLAHASSEE, FL 32304

FEI Number: 59-3505265 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

GOWAN, SAMUEL NUNEZ, VICTOR
406 N.E. 5TH AVENUE 227 WESTMINISTER DRIVE
GAINESVILLE, FL 32601 US TALLAHASSEE, FL 32304 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: VICTOR NUNEZ 08/10/2009

Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

 Title:
 MGR
 ( ) Delete
 Title:
 MGR
 (X) Change ( ) Addition

 Name:
 NUNEZ-GOWAN PRODUCTIONS, INC.
 Name:
 NUNEZ-GOWAN PRODUCTIONS, INC.

 Address:
 406 N.E. 5TH AVENUE
 Address:
 227 WESTMINISTER DR.

 City-St-Zip:
 GAINESVILLE, FL 32601
 City-St-Zip:
 TALLAHASSEE, FL 32304

Title: ( ) Delete Title: V ( ) Change (X) Addition

 Name:
 Name:
 NUNEZ, CYNTHIA

 Address:
 Address:
 227 WESTMINISTER DR.

 City-St-Zip:
 City-St-Zip:
 TALLAHASSEE, FL 32304

Title: ( ) Delete Title: S ( ) Change (X) Addition

 Name:
 Name:
 NUNEZ, VINCENT

 Address:
 Address:
 816 PARKER DR.

 City-St-Zip:
 City-St-Zip:
 TALLAHASSEE, FL 32303

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: VICTOR NUNEZ MGR 08/10/2009