

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000001544

FILED  
Apr 25, 2007  
Secretary of State

Entity Name: HANDLEMAN ENTERTAINMENT RESOURCES L.L.C.

## Current Principal Place of Business:

500 KIRTS BLVD.  
TROY, MI 480844142

## New Principal Place of Business:

## Current Mailing Address:

500 KIRTS BLVD.  
TROY, MI 480844142

## New Mailing Address:

FEI Number: 38-3597942

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: V ( ) Delete  
Name: SCHMID, THOMAS  
Address: 500 KIRTS BLVD.  
City-St-Zip: TROY, MI 480844142

Title: V ( ) Delete  
Name: HEIDEL, MARK  
Address: 500 KIRTS BLVD.  
City-St-Zip: TROY, MI 480844142

Title: VCC ( ) Delete  
Name: BRAUM, THOMAS C JR.  
Address: 500 KIRTS BLVD.  
City-St-Zip: TROY, MI 480844142

Title: ST ( ) Delete  
Name: KARTJE, KENNETH P  
Address: 500 KIRTS BLVD.  
City-St-Zip: TROY, MI 480844142

Title: P (X) Delete  
Name: WILSON, SCOTT  
Address: 500 KIRTS BLVD  
City-St-Zip: TROY, MI 48084

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: SCHMID, THOMAS  
Address: 500 KIRTS BLVD.  
City-St-Zip: TROY, MI 480844142

Title: MGR (X) Change ( ) Addition  
Name: HEIDEL, MARK  
Address: 500 KIRTS BLVD.  
City-St-Zip: TROY, MI 480844142

Title: MGR (X) Change ( ) Addition  
Name: BRAUM, THOMAS C JR.  
Address: 500 KIRTS BLVD.  
City-St-Zip: TROY, MI 480844142

Title: MGR (X) Change ( ) Addition  
Name: KARTJE, KENNETH P  
Address: 500 KIRTS BLVD.  
City-St-Zip: TROY, MI 480844142

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: KENNETH P. KARTJE

MGR

04/25/2007

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