FILED Apr 30, 2002 8:00 am Secretary of State LIMITED LIABILITY COMPANY **UNIFORM BUSINESS REPORT (UBR)** DOCUMENT # MO100000 2827 04-30-2002 90107 010 ****55 00 2 MUSE MEDIA & MANAGEMENT LLC 947091 DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 3. Mailing Address 3734 Lyndhurst Court Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Sarasota, MA SAME City & State City & State 4. FEI Number Applied For Not Applicable 3**4235-2411** Zip 954825350 Country Country \$5.00 Additional 5. Certificate of Status Desired 34235-2411 Sarasota Fee Required 7. Name and Address of Current Registered Agent DO NOT WRITE <u>Bridgett-Walther</u> Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE 3734 Lyndhurst Court 34235-2411 Sarasota 8. 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 FEE IS \$50.00 Make Check Payable to Department of State **DUE BY MAY 1** MANAGING MEMBERS/MANAGERS TITLE. TITLE Manager NAME NAME Bridgett Walther STREET ADDRESS STREET ADDRESS 3734 Lyndhurst Court CITY-ST-7IP CITY-ST-ZIP Sarasota, FL 34235-2411 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE -NAME NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE IN THIS SPACE NAME NAME STREET ADDRESS STREET ADDRESS

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 1,19.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

NAME

NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

NAME

TITLE NAME

4-19-02

(941) 777.9910