

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000006758

FILED  
Jan 05, 2011  
Secretary of State

**Entity Name:** BROTHERS MEDIA GROUP, LLC

**Current Principal Place of Business:**

5000 SAWGRASS VILLAGE CIRCLE  
SUITE 32  
PONTE VEDRA BEACH, FL 32082

**New Principal Place of Business:**

**Current Mailing Address:**

5000 SAWGRASS VILLAGE CIRCLE  
SUITE 32  
PONTE VEDRA BEACH, FL 32082

**New Mailing Address:**

**FEI Number:** 20-8802691

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DANIELS, JERRY  
5000 SAWGRASS VILLAGE CIRCLE  
SUITE 32  
PONTE VEDRA BEACH, FL 32082 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:** DANIELS, JERRY  
**Address:** 281 LINKSIDE CIRCLE  
**City-St-Zip:** PONTE VEDRA BEACH, FL 32082

**Title:** MGRM  
**Name:** MORTENSEN, STEVEN B.  
**Address:** 124 INDIAN HAMMOCK LANE  
**City-St-Zip:** PONTE VEDRA BEACH, FL 32082

**Title:** MGR  
**Name:** PORTER, DOUGLAS  
**Address:** 225 N. MICHIGAN AVENUE  
**City-St-Zip:** CHICAGO, IL 60601

**Title:** MGR  
**Name:** HELFMAN, JEFFREY  
**Address:** 1816 SKYLINE DRIVE  
**City-St-Zip:** FULLERTON, CA 92831

**Title:** MGR  
**Name:** EVANS, JAMES  
**Address:** 5511 CARMEL PARK DRIVE  
**City-St-Zip:** CHARLOTTE, NC 28226

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:** JERRY DANIELS

MGRM

01/05/2011

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