

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000003355

FILED  
Apr 17, 2009  
Secretary of State

Entity Name: BACKYARDIGANS TOURING, LLC

**Current Principal Place of Business:**

220 WEST 42ND STREET, 14TH FLOOR  
NEW YORK, NY 10036

**New Principal Place of Business:**

1619 BROADWAY  
9TH FLOOR  
NEW YORK, NY 10019

**Current Mailing Address:**

220 WEST 42ND STREET, 14TH FLOOR  
NEW YORK, NY 10036

**New Mailing Address:**

1619 BROADWAY  
9TH FLOOR  
NEW YORK, NY 10019

FEI Number: 26-0750373

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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:

04/17/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: KEY BRAND FAMILY ENTERTAINMENT, INC.  
Address: 220 WEST 42ND STREET, 14TH FLOOR  
City-St-Zip: NEW YORK, NY 10036

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: KEY BRAND FAMILY ENTERTAINMENT, INC.  
Address: 1619 BROADWAY, 9TH FLOOR  
City-St-Zip: NEW YORK, NY 10019

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: DAVID B. STERN

SEC

04/17/2009

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