2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000107987

Entity Name: LIMELIGHT MARKETING, INC.

FILED Feb 12, 2009 Secretary of State

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

22221 SW 103 COURT 22221 SW 103 COURT MIAMI, FL 33190 CUTLER BAY, FL 33190

Current Mailing Address: New Mailing Address:

22221 SW 103 COURT PO BOX 971248 MIAMI, FL 33190 MIAMI, FL 33197

FEI Number: 26-3893132 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

SORONELLAS, MARIA A
17415 S. DIXIE HIGHWAY
PALMETTO BAY, FL 33157 US
SORONELLAS, MARIA
17415 S. DIXIE HIGHWAY
PALMETTO BAY, FL 33157 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: SORONELLAS MARIA 02/12/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 DP () Delete
 Title:
 P (X) Change () Addition

 Name:
 ADEYEMI, ABIODUN B
 Name:
 ADEYEMI, MARY

 Address:
 PO BOX 971248
 Address:
 PO BOX 971248

Address: PO BOX 9/1248 Address: PO BOX 9/1248 City-St-Zip: MIAMI, FL 33197 City-St-Zip: MIAMI, FL 33197

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

 Name:
 ADEYEMI, OLUWATOSIN
 Name:
 ADEYEMI, OLUWATOSIN

 Address:
 22221 SW 103 COURT
 Address:
 PO BOX 971248

 City-St-Zip:
 MIAMI, FL 33190
 City-St-Zip:
 MIAMI, FL 33197

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

 Name:
 Name:
 ADEYEMI, ABIODUN B

 Address:
 Address:
 PO BOX 971248

 City-St-Zip:
 City-St-Zip:
 MIAMI, FL 33197

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

Name: Name: ADEYEMI, OLÂRENWAJÛ
Address: Address: PO BOX 971248

 Address:
 Address:
 PO BOX 971248

 City-St-Zip:
 City-St-Zip:
 MIAMI, FL 33197

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ADEYEMI MARY P 02/12/2009