# SIGNA

Electronic Signature of Signing Authorized Person(s) Detail

## 2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000038442

Entity Name: AN AFRICAN TALE MOVIE LLC

#### **Current Principal Place of Business:**

4975 DIXIE HWY NE 503 PALM BAY, FL 32905

## **Current Mailing Address:**

4975 DIXIE HWY NE 503 PALM BAY, FL 32905 US

## FEI Number: 26-4633580

## Name and Address of Current Registered Agent:

STURM, WILLEM J 4975 DIXIE HWY NE 503 PALM BAY, FL 32905 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:

Electronic Signature of Registered Agent

#### Authorized Person(s) Detail :

MGR	Title	MGR
STURM, WILLEM J	Name	STURM, MARIE M
4975 DIXIE HWY NE, # 503	Address	4975 DIXIE HWY NE, # 503
PALM BAY FL 32905	City-State-Zip:	PALM BAY FL 32905
	MGR STURM, WILLEM J 4975 DIXIE HWY NE, # 503	MGRTitleSTURM, WILLEM JName4975 DIXIE HWY NE, # 503Address

I hereby 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 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; and that my name appears above, or on an attachment with all other like empowered.

TURE: MARIE M V STURM
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DIRECTOR

03/21/2013

Date

FILED Mar 21, 2013 Secretary of State CC7064793028

Certificate of Status Desired: No

Date