

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000022010

**FILED**  
**Jan 06, 2011**  
**Secretary of State**

**Entity Name:** ATLANTIC TRUSS GROUP, L.L.C.

**Current Principal Place of Business:**

2590 N. KINGS WAY  
FORT PIERCE, FL 34951 US

**New Principal Place of Business:**

**Current Mailing Address:**

2840 UNIVERSITY DRIVE  
CORAL SPRINGS, FL 33065 US

**New Mailing Address:**

1855 EAGLE TRACE BLVD.  
CORAL SPRINGS, FL 33071 US

**FEI Number:** 71-0964119

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

GILLESPIE & ALLISON  
7601 N FEDERAL HIGHWAY  
165-A  
BOCA RATON, FL 33487 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:** MARTZ, BEN  
**Address:** 2060 AUGUSTA TERRACE  
**City-St-Zip:** CORAL SPRINGS, FL 33071

**Title:** MGR  
**Name:** LEWIS, LARRY  
**Address:** 1855 EAGLE TRACE BLVD  
**City-St-Zip:** CORAL SPRINGS, FL 33071

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:** LARRY LEWIS

MGR

01/06/2011

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