

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000071334

FILED  
Aug 23, 2006  
Secretary of State

Entity Name: AMERICAN SCREEN DISTRIBUTORS, LLC

**Current Principal Place of Business:**

6621 BERET DRIVE  
ORLANDO, FL 32809

**New Principal Place of Business:**

**Current Mailing Address:**

6621 BERET DRIVE  
ORLANDO, FL 32809

**New Mailing Address:**

FEI Number: 20-3112672      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

CONWAY, WILLIAM H III  
6621 BERET DRIVE  
ORLANDO, FL 32809      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      ( ) Delete  
Name: CONWAY, WILLIAM H III  
Address: 6621 BERET DRIVE  
City-St-Zip: ORLANDO, FL 32809

Title: MGRM      ( ) Delete  
Name: ENGELHARDT, CARY M  
Address: 944 SE WESTMINSTER PLACE  
City-St-Zip: STUART, FL 34997

Title: MGRM      ( ) Delete  
Name: HANCOX, WILLIAM  
Address: 353 US HIGHWAY 1 JUPITER BAY F408 WEST  
City-St-Zip: JUPITER, FL 33476

Title: MGRM      ( ) Delete  
Name: HANCOX, RICHARD W  
Address: 2448 SW MALIBU WAY  
City-St-Zip: STUART, FL 34997

**ADDITIONS/CHANGES:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: WILLIAM H CONWAY III

MGRM

08/23/2006

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