

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000041143

**FILED**  
**Mar 22, 2011**  
**Secretary of State**

**Entity Name:** SPECIALTY PRINTING MIDWEST LLC

**Current Principal Place of Business:**

6900-29 DANIELS PARKWAY  
266  
FT MYERS, FL 33912

**New Principal Place of Business:**

**Current Mailing Address:**

6937 DREW DRIVE  
EDWARDSVILLE, IL 62025

**New Mailing Address:**

FEI Number: 26-4775986

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

SCHAEFFER, KERI S MBR  
6900-29 DANIELS PARKWAY  
266  
FT MYERS, FL 33912 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: SCHAEFFER, KERI S  
Address: 6900-29 DANIELS PARKWAY # 266  
City-St-Zip: FT MYERS, FL 33912

Title: MGRM  
Name: SCHAEFFER, PAMELA  
Address: 6900-29 DANIELS PARKWAY # 266  
City-St-Zip: FT MYERS, FL 33912

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: KERI S. SCHAEFFER

MGRM

03/22/2011

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