

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M96000000137

FILED  
Apr 18, 2011  
Secretary of State

**Entity Name:** GURWITCH PRODUCTS, L.L.C.

**Current Principal Place of Business:**

13259 NORTH PROMENADE BLVD  
STAFFORD, TX 77477 US

**New Principal Place of Business:**

**Current Mailing Address:**

13259 NORTH PROMENADE BLVD  
STAFFORD, TX 77477 US

**New Mailing Address:**

**FEI Number:** 20-4780005

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: PD  
Name: COLLIER, SHARON  
Address: 13259 N PROMENADE BLVD  
City-St-Zip: STAFFORD, TX 77477 US

Title: D  
Name: WEAVER, JAMES M  
Address: 7575 FULTON ST EAST  
City-St-Zip: ADA, MI 49355 US

Title: T  
Name: WITCHER, CRAIG V  
Address: 7575 FULTON ST EAST  
City-St-Zip: ADA, MI 49355 US

Title: D  
Name: TUIT, DAVID J  
Address: 7575 FULTON ST EAST  
City-St-Zip: ADA, MI 49355 US

Title: VD  
Name: COLMAN, ROGER C  
Address: 7575 FULTON ST EAST  
City-St-Zip: ADA, MI 49355 US

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: THERESA A DYKHUIS

ATR

04/18/2011

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