2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000004405

Title:

Name:

Address:

City-St-Zip:

MGRM

PO BOX 1658

() Delete

STEPHENS, ROBERT E

MELBOURNE, FL 329021658

Entity Name: PNEUMOFLEX SYSTEMS, LLC

FILED Jan 11, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 101 EAST FLORIDA AVE. MELBOURNE, FL 32901 **Current Mailing Address: New Mailing Address:** PO BOX 1658 MELBOURNE, FL 329021658 FEI Number: 59-3736748 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KANCILIA, JOHN R ESQ KANCILIA, JOHN R ESQ. 1800 WEŚT HIBISCUS BLVD. 1800 WEŚT HIBISCUS BLVD. SUITE 138 SUITE 100 MELBOURNE, FL 32902 US MELBOURNE, FL 32901 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: 01/11/2008 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: () Delete MGRM Title: () Change () Addition PNEUMOFLEX, INC, Name: Name: PO BOX 1658 Address: Address: City-St-Zip: MELBOURNE, FL 329021658 City-St-Zip: Title: MGRM Title: () Delete () Change () Addition KENNEDY, WILLIAM P Name: Name: Address: PO BOX 1658 Address: City-St-Zip: MELBOURNE, FL 329021658 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition ADDINGTON, W ROBERT II Name: Name: Address: PO BOX 1658 Address: City-St-Zip: MELBOURNE, FL 329021658 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: MILLER, STUART P Name: Address: PO BOX 1658 Address: City-St-Zip: MELBOURNE, FL 329021658 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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.

Title:

Name:

Address:

City-St-Zip:

() Change () Addition

SIGNATURE: W. ROBERT ADDINGTON DO MGRM 01/11/2008