

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000004405

FILED  
Jan 20, 2009  
Secretary of State

Entity Name: PNEUMOFLEX SYSTEMS, LLC

## Current Principal Place of Business:

101 EAST FLORIDA AVE.  
MELBOURNE, FL 32901

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 1658  
MELBOURNE, FL 329021658

## New Mailing Address:

FEI Number: 59-3736748

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KANCILIA, JOHN R ESQ.  
1800 WEST HIBISCUS BLVD.  
SUITE 100  
MELBOURNE, FL 32901 US

## Name and Address of New Registered Agent:

KANCILIA, JOHN R ESQ.  
1795 WEST NASA BLVD  
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: JOHN R. KANCILIA

01/20/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: PNEUMOFLEX, INC,  
Address: PO BOX 1658  
City-St-Zip: MELBOURNE, FL 329021658

Title: MGRM ( ) Delete  
Name: KENNEDY, WILLIAM P  
Address: PO BOX 1658  
City-St-Zip: MELBOURNE, FL 329021658

Title: MGRM ( ) Delete  
Name: ADDINGTON, W ROBERT II  
Address: PO BOX 1658  
City-St-Zip: MELBOURNE, FL 329021658

Title: MGRM ( ) Delete  
Name: MILLER, STUART P  
Address: PO BOX 1658  
City-St-Zip: MELBOURNE, FL 329021658

Title: MGRM ( ) Delete  
Name: STEPHENS, ROBERT E  
Address: PO BOX 1658  
City-St-Zip: MELBOURNE, FL 329021658

## 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:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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.

SIGNATURE: W. ROBERT ADDINGTON

MGRM

01/20/2009

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