

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000018428

FILED
Sep 17, 2008
Secretary of State

Entity Name: THE ACME COMPANY, LLC

Current Principal Place of Business:

142 SE EGLIN PARKWAY
FORT WALTON BEACH, FL 32548

New Principal Place of Business:

Current Mailing Address:

142 SE EGLIN PARKWAY
FORT WALTON BEACH, FL 32548

New Mailing Address:

HH MUSTIN ROAD
NAS
JACKSONVILLE, FL 32212

FEI Number: 81-0555673 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:

STEIGLEMAN, WALTER A JR.
142 SE EGLIN PARKWAY
FORT WALTON BEACH, FL 32548 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: STEIGLEMAN, WALTER A JR.
Address: P.O. BOX 685
City-St-Zip: FORT WALTON BEACH, FL 32549

Title: MGRM () Delete
Name: STEIGLEMAN, WALTER A III
Address: P.O. BOX 685
City-St-Zip: FORT WALTON BEACH, FL 32549

ADDITIONS/CHANGES:

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: WALTER ALLAN STEIGLEMAN, III

MGRM

09/17/2008

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