## **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

**DOCUMENT # L01000021093** 

1. Entity Name

STRONGSEAL RECYCLED RUBBERIZED PRODUCTS,

LLC

Principal Place of Business

400 N. NEW YORK AVENUE, SUITE 103 WINTER PARK, FL 32789

Mailing Address

400 N. NEW YORK AVENUE, SUITE 103

WINTER PARK, FL 32789

## **FILED** Jun 13, 2007 08:00 AN Secretary of State



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03012007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 59-3631085 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

OGILVIE, CH JR 400 N. NEW YORK AVENUE, SUITE 103 WINTER PARK, FL 32789

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and true if applicable.

(NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2007

U00000766260 06/13/07~80003-011 50.00

MANAGING MEMBERS/MANAGERS 9. TITLE NAME OGILVIE, C.H. JR STREET ADDRESS 400 N. NEW YORK AVENUE, SUITE 103 CITY-ST-ZIP WINTER PARK, FL 32789 TITLE NAME RICHARDSON, BARRIE C 400 N NEW YORK AVE., STE 103 STREET ADDRESS CITY-ST-ZIP WINTER PARK, FL 32789 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CTTY-ST-ZIP

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and the my 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 improvered to execute this report as required by Chapter 608, Florida Statutes.

CICMATUBE.