

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000003284

Entity Name: LCM DISPLAYS LLC

FILED  
Jan 09, 2007  
Secretary of State

## Current Principal Place of Business:

14136 MAGNOLIA GLEN CIRCLE  
ORLANDO, FL 32828

## New Principal Place of Business:

8541 CHRISTOPHERS HAVEN COURT  
SANFORD, FL 32771

## Current Mailing Address:

14136 MAGNOLIA GLEN CIRCLE  
ORLANDO, FL 32828

## New Mailing Address:

8541 CHRISTOPHERS HAVEN COURT  
SANFORD, FL 32771

FEI Number: 71-0867483

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SAID, STEVE M  
14136 MAGNOLIA GLEN CIRCLE  
ORLANDO, FL 32828 US

## Name and Address of New Registered Agent:

SAID, STEVE M  
8541 CHRISTOPHERS HAVEN COURT  
SANFORD, FL 32771 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:

01/09/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: SAID, STEVE M  
Address: 14136 MAGNOLIA GLEN CIRCLE  
City-St-Zip: ORLANDO, FL 32828

Title: MGRM ( ) Delete  
Name: SAID, DIANNE A  
Address: 14136 MAGNOLIA GLEN CIRCLE  
City-St-Zip: ORLANDO, FL 32828

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: SAID, STEVE M  
Address: 8541 CHRISTOPHERS HAVEN COURT  
City-St-Zip: SANFORD, FL 32771

Title: MGRM (X) Change ( ) Addition  
Name: SAID, DIANNE A  
Address: 8541 CHRISTOPHERS HAVEN COURT  
City-St-Zip: SANFORD, FL 32771

I hereby certify that the information supplied with this filing does not qualify for the 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: STEVE M SAID

MGRM

01/09/2007

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