

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000022249

FILED  
Apr 26, 2006  
Secretary of State

**Entity Name:** SEA LINK TOOL & MANUFACTURING COMPANY, L.L.C.

**Current Principal Place of Business:**

SEA LINK TOOL & MFG, CO. LLC  
98 GLASPIE ST. S.  
OXFORD, MI 48371

**New Principal Place of Business:**

15950 BAY VISTA DRIVE  
SUITE 140  
CLEARWATER, FL 33760

**Current Mailing Address:**

15950 BAY VISTA DRIVE, SUITE 140  
CLEARWATER, FL 33760

**New Mailing Address:**

15950 BAY VISTA DRIVE,  
SUITE 140  
CLEARWATER, FL 33760

**FEI Number:** 75-3079251

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MCFARLAND, SCOTT  
15950 BAY VISTA DRIVE, SUITE 140  
CLEARWATER, FL 33760 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: VDTS ( ) Delete  
Name: COBINE, CRAIG  
Address: 2110 W. JETTON AVENUE  
City-St-Zip: TAMPA, FL 33606

Title: PD ( ) Delete  
Name: MCFARLAND, SCOTT  
Address: 204 HIGHLAND WOODS DRIVE  
City-St-Zip: SAFETY HARBOR, FL 34695

**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 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: SCOTT J. MCFARLAND

PD

04/26/2006

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