

# **2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000018715

Entity Name: FILLWORKS, L.L.C.

**FILED**  
**Mar 20, 2009**  
**Secretary of State**

**Current Principal Place of Business:**

4960 LAKELAND COMMERCE PKWY  
SUITE #5  
LAKELAND, FL 33805

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2376  
LAKELAND, FL 338062376

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

PEDDY, ROBERT B JR.  
4202 S. FLORIDA AVE.  
LAKELAND, FL 33803 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: MGR ( ) Delete  
Name: BARBER, MATTHEW P  
Address: P.O. BOX 2376  
City-St-Zip: LAKELAND, FL 33806 US

**ADDITIONS/CHANGES:**

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: MATTHEW BARBER

MGR

03/20/2009

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