

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000041598

FILED
Feb 03, 2009
Secretary of State

Entity Name: FORMATION TECHNOLOGIES, LLC

Current Principal Place of Business:

7003 COHASSET CIRCLE
RIVERVIEW, FL 33569

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 25401
TAMPA, FL 33622

New Mailing Address:

7003 COHASSET CIRCLE
RIVERVIEW, FL 33569

FEI Number: 20-2278473

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KILPATRICK, TIMOTHY B SR.
7003 COHASSET CIRCLE
RIVERVIEW, FL 33569 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: KILPATRICK, TIMOTHY B SR.
Address: 7003 COHASSET CIRCLE
City-St-Zip: RIVERVIEW, FL 33569

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: TIMOTHY B KILPATRICK, SR

MGR

02/03/2009

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