

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000047889

Entity Name: AIR AFFECTS LLC

**FILED**  
**Jan 25, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

803 ST. RD. 16 EAST  
GREEN COVE SPRINGS, FL 32043 US

**New Principal Place of Business:**

**Current Mailing Address:**

5697 RAVINE HILL DR  
MIDDLEBURG, FL 32068 US

**New Mailing Address:**

FEI Number: 92-0180904

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STURDIVANT, ERVIN M  
5697 RAVINE HILL DR.  
MIDDLEBURG, FL 32068 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: P  
Name: STURDIVANT, ERVIN  
Address: 5697  
City-St-Zip: MIDDLEBURG, FL 32043

Title: VP  
Name: WARD, DAWN  
Address: 3646 ARAVA DR  
City-St-Zip: GREEN COVE SPRINGS, FL 32068

I hereby 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: E M STURDIVANT

PRES

01/25/2011

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