

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000056630

FILED  
Feb 16, 2011  
Secretary of State

Entity Name: HURRICANE TEST LABORATORY, LLC

**Current Principal Place of Business:**

6655 GARDEN RD  
RIVIERA BEACH, FL 33404

**New Principal Place of Business:**

6655 GARDEN RD  
RIVIERA BEACH, FL 33404 US

**Current Mailing Address:**

6655 GARDEN RD  
RIVIERA BEACH, FL 33404

**New Mailing Address:**

6655 GARDEN RD  
RIVIERA BEACH, FL 33404 US

FEI Number: 65-0432767

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

ABRAHAM, VINU J  
12479 AVILIS CIRCLE  
PALM BEACH GARDENS, FL 33418 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: MGRM  
Name: ABRAHAM, VINU  
Address: 12479 AVILIS CIRCLE  
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: MGRM  
Name: SMITH, MILTON  
Address: 13805 B NCR 1500  
City-St-Zip: SHALLOWATER, TX 79363 US

Title: MGRM  
Name: NORVILLE, SCOTT H  
Address: 3123 19TH STREET  
City-St-Zip: LUBBOCK, TX 79410 US

Title: MGRM  
Name: MINOR, JOSEPH  
Address: 712 WATER WOOD STREET  
City-St-Zip: ROCKPORT, TX 78382 US

Title: MGRM  
Name: BEERS, PAUL  
Address: 236 MONTANT DRIVE  
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

Title: MGRM  
Name: COLON, JOSE  
Address: 400 W PEACHTREE ST NW #1209  
City-St-Zip: ATLANTA, GA 30308 US

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: VINU ABRAHAM

MGRM

02/16/2011

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