

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000005644

Entity Name: ALLPRO TINT, LLC

**FILED**  
**Jan 16, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

4410 S. FEDERAL HWY.  
FORT PIERCE, FL 34982

**New Principal Place of Business:**

4790 S. FEDERAL HWY.  
FORT PIERCE, FL 34982

**Current Mailing Address:**

4410 S. FEDERAL HWY.  
FORT PIERCE, FL 34982

**New Mailing Address:**

4790 S. FEDERAL HWY.  
FORT PIERCE, FL 34982

FEI Number: 43-2040597

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BLAND, JOHN E  
463 SW TALQUIN LANE  
PORT ST. LUCIE, FL 34986 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: BLAND, JOHN E  
Address: 463 SW TALQUIN LANE  
City-St-Zip: PORT ST. LUCIE, FL 34986

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: JOHN E. BLAND

MGRM

01/16/2012

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