

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000021165

**FILED**  
**Feb 02, 2010**  
**Secretary of State**

**Entity Name:** NATIONAL ASSOCIATION OF FIXTURE & GRAPHICS INSTALLERS, LLC

**Current Principal Place of Business:**

1970 HWY 87  
#101  
NAVARRE, FL 32566

**New Principal Place of Business:**

**Current Mailing Address:**

1970 HWY 87  
#101  
NAVARRE, FL 32566

**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:**

LONG, LOUIS  
1201 EGLIN PARKWAY  
SHALIMAR, FL 32579    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: HODGE, TAMI K  
Address: 2209 ORION LAKE DRIVE  
City-St-Zip: NAVARRE, FL 32566

Title: MGRM  
Name: HODGE, DOUGLAS P JR  
Address: 2209 ORION LAKE DRIVE  
City-St-Zip: NAVARRE, FL 32566

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: TAMMI K. HODGE

PRES

02/02/2010

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