

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000045650

FILED
Apr 10, 2009
Secretary of State

Entity Name: BRIDPORT PRINTING GROUP, LLC

Current Principal Place of Business:

1328 WEST CHURCH STREET
ORLANDO, FL 32805 US

New Principal Place of Business:

Current Mailing Address:

1328 WEST CHURCH STREET
ORLANDO, FL 32805 US

New Mailing Address:

FEI Number: 20-1314233

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLEMENTS, ROBERT G
5728 MAJOR BLVD.
SUITE 600
ORLANDO, FL 32819 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 () Delete
Name: LABERGE, EILEEN J
Address: 806 KEATON PARKWAY
City-St-Zip: OCOEE, FL 34761 US

Title: MGRM () Delete
Name: LABERGE, RICHARD R
Address: 1642 N E 497TH STREET
City-St-Zip: OLD TOWN, FL 32680 US

Title: MGRM () Delete
Name: LABERGE, JETTIS
Address: 1642 N E 497TH STREET
City-St-Zip: OLD TOWN, FL 32680 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: EILEEN LABERGE

MGRM

04/10/2009

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