## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000048902

Entity Name: NU TECH COATINGS LLC

FILED Feb 06, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1008 WILLOWS TRACE DRIVE JOHNSON CITY, TN 37601 **Current Mailing Address: New Mailing Address:** 1008 WILLOWS TRACE DRIVE JOHNSON CITY, TN 37601 FEI Number: 20-1325746 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BRUNST, JORDAN 15215 PLANTATION OAKS DRIVE #7 TAMPA, FL 33647 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: ADDITIONS/CHANGES: Title: () Change () Addition () Delete BRUNST, GEORGE E Name: Name: 1008 WILLOWS TRACE DRIVE Address: Address: City-St-Zip: JOHNSON CITY, TN 37601 City-St-Zip: Title: MGR () Delete Title: () Change () Addition WYMAN, JAMES V Name: Name: Address: 1666 STODDARD CIRCLE Address: City-St-Zip: KENNESAW, GA 30152 City-St-Zip: Title: MGR () Delete Title: MGR (X) Change ( ) Addition BRUNST, JORDAN BRUNST, JORDAN Name: Name: 14216 CYBER PLACE 15215 PLANTATION OAKS DRIVE #7 Address: Address: City-St-Zip: TAMPA, FL 33613 City-St-Zip: TAMPA, FL 33647 Title: MGR ( ) Delete Title: () Change () Addition Name: WYMAN, JACK Name: 693 EMERIL COURT Address: Address: City-St-Zip: SANIBEL, FL 33957 City-St-Zip: Title: MGR ( ) Delete Title: () Change () Addition FOSTER-BRUNST, DEBRA Name: Name: 1008 WILLOWS TRACE DRIVE Address: Address: City-St-Zip: JOHNSON CITY, TN 37601 City-St-Zip: Title: () Delete Title: () Change () Addition WYMAN, MARY Name: Name: Address: 1666 STODDARD CIRCLE Address: KENNESAW, GA 30152 City-St-Zip: 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: DEBRA A. FOSTER-BRUNST MGR 02/06/2008