

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000068908

Entity Name: SCREEN MACHINES, LLC

FILED  
Jan 10, 2006  
Secretary of State

**Current Principal Place of Business:**

2422 OLD SAMSULA DRIVE  
PORT ORANGE, FL 32128 US

**New Principal Place of Business:**

2525 PALM DRIVE  
PORT ORANGE, FL 32128 US

**Current Mailing Address:**

18 STRATFORD PLACE  
ORMOND BEACH, FL 32174 US

**New Mailing Address:**

FEI Number: 90-0213592      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

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

WILLIAMS, MICHAEL M  
18 STRATFORD PLACE  
ORMOND BEACH, FL 32174 US

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: MICHAEL M. WILLIAMS

01/10/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: KULL, BRIAN T SEC./TR  
Address: PO BOX 238083  
City-St-Zip: ALLANDALE, FL 32123 US

Title: MGRM ( ) Delete  
Name: WILLIAMS, MICHAEL M PRES.  
Address: 18 STRATFORD PLACE  
City-St-Zip: ORMOND BEACH, FL 32174 US

**ADDITIONS/CHANGES:**

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 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: MICHAEL M. WILLIAMS

PRES

01/10/2006

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