

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000079409

Entity Name: ATEMI, L.L.C.

FILED
May 25, 2006
Secretary of State

Current Principal Place of Business:

2727 PARRISH ROAD
COCOA, FL 32926

New Principal Place of Business:

Current Mailing Address:

2727 PARRISH ROAD
COCOA, FL 32926

New Mailing Address:

FEI Number: 20-1837432 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

LEISETH, BRUCE R
2727 PARISH ROAD
COCOA, FL 32926 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: ROY, WILLIAM J
Address: 2727 PARRISH ROAD
City-St-Zip: COCOA, FL 32926

Title: MGRM () Delete
Name: LEISETH, BRYCE R
Address: 2727 PARRISH ROAD
City-St-Zip: COCOA, FL 32926

Title: MGRM () Delete
Name: RICHARDSON, BARRY
Address: 2727 PARRISH ROAD
City-St-Zip: COCOA, FL 32926

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: LEISETH, BRUCE R
Address: 2727 PARRISH ROAD
City-St-Zip: COCOA, FL 32926

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: BRUCE R. LEISETH

MGRM

05/25/2006

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