

# 2005 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L04000083262

FILED  
Nov 08, 2005  
Secretary of State

Entity Name: ALL POLY, LLC

**Current Principal Place of Business:**

13604 COUNTY LINE ROAD  
FOUNTAIN, FL 32438

**New Principal Place of Business:**

13612 COUNTY LINE ROAD  
FOUNTAIN, FL 32438

**Current Mailing Address:**

13604 COUNTY LINE ROAD  
FOUNTAIN, FL 32438

**New Mailing Address:**

P. O. BOX 131  
FOUNTAIN, FL 32438

FEI Number: 20-2050634

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

HOOVER, ROGER A  
13604 COUNTY LINE ROAD  
FOUNTAIN, FL 32438 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: HOOVER, ROGER A  
Address: 13604 COUNTY LINE ROAD  
City-St-Zip: FOUNTAIN, FL 32438

Title: MEM (X) Delete  
Name: HOOVER, CHRISTINE M  
Address: 13604 COUNTY LINE ROAD  
City-St-Zip: FOUNTAIN, FL 32438

**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 Section 119.07(3)(i), 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: ROGER A HOOVER

MGRM

11/08/2005

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