2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000006114

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

PANAMA CITY, FL 32408

11715 BELLAGID RD. #1

LOS ANGELES, CA 90049

WAY, NOELLE C

() Delete

Entity Name: BIMWAY TOOL COMPANY LLC

FILED Apr 23, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 7914 N. LAGOON DR 7505 HOLLEY CIRCLE PANAMA CITY BEACH, FL 32408 PANAMA CITY BEACH, FL 32408 **Current Mailing Address: New Mailing Address:** P.O. BOX 18155 PANAMA CITY BEACH, FL 32417 FEI Number: 20-2621583 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KARR, SUSANNE M KARR, SUSANNE M 7914 N. LAGGON DR 7505 HOLLEY CIRCLE PANAMA CITY BEACH, FL 32408 US PANAMA CITY BEACH, FL 32408 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: 04/23/2009 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM () Delete Title: () Change () Addition KARR, KEN Name: Name: Address: 8837 N. LAGOON DR Address: City-St-Zip: PANAMA CITY BEACH, FL 32408 City-St-Zip: Title: () Delete Title: () Change () Addition WAY, ROBERT L Name: Name: Address: 8837 N. LAGOON DR Address: City-St-Zip: PANAMA CITY, FL 32408 City-St-Zip: Title: () Delete Title: () Change () Addition KARR, SUSANNE M Name: Name: 8837 N. LAGOON DR Address: Address:

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.

City-St-Zip:

() Change () Addition

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: KENNETH L. KARR MGRM 04/23/2009