

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000047386

FILED  
Jan 14, 2008  
Secretary of State

Entity Name: SIEME MUIR,LLC

**Current Principal Place of Business:**

999 NE WRIGHT AVE.  
JENSEN BEACH, FL 34957

**New Principal Place of Business:**

**Current Mailing Address:**

999 NE WRIGHT AVE.  
JENSEN BEACH, FL 34957

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

KRABBE, JANICE  
999 NE WRIGHT AVE  
JENSEN BEACH, FL 34957 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: MGR ( ) Delete  
Name: KRABBE, JANICE  
Address: 999 NE WRIGHT AVE  
City-St-Zip: JENSEN BEACH, FL 34957

Title: MGR ( ) Delete  
Name: KRABBE, SANDY  
Address: 10601 WINDING WAY DR  
City-St-Zip: HARRISON, OH 45030 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 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: JANICE KRABBE

MGRM

01/14/2008

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