

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000067314

FILED
Feb 26, 2009
Secretary of State

Entity Name: AXIS-STRONG TECHNOLOGIES LLC

Current Principal Place of Business:

10263 WHISPERING FOREST DRIVE
#117
JACKSONVILLE, FL 32257 US

New Principal Place of Business:

531 WOODED CROSSING CIRCLE
ST AUGUSTINE, FL 32084 US

Current Mailing Address:

10263 WHISPERING FOREST DRIVE
#117
JACKSONVILLE, FL 32257 US

New Mailing Address:

531 WOODED CROSSING CIRCLE
ST AUGUSTINE, FL 32084 US

FEI Number: 20-3115072

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCLEAN, ALEXANDER W
10263 WHISPERING FOREST DRIVE
#117
JACKSONVILLE, FL 32257 US

Name and Address of New Registered Agent:

MCLEAN, ALEXANDER W
531 WOODED CROSSING CIRCLE
ST AUGUSTINE, FL 32084 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: ALEXANDER W MCLEAN

02/26/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MCLEAN, ALEXANDER W
Address: 10263 WHISPERING FOREST DRIVE #117
City-St-Zip: JACKSONVILLE, FL 32257 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MCLEAN, ALEXANDER W
Address: 531 WOODED CROSSING CIRCLE
City-St-Zip: ST AUGUSTINE, FL 32084 US

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: ALEXANDER W MCLEAN

MGRM

02/26/2009

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