2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 15, 2009
Secretary of State

DOCUMENT# L05000076503

Entity Name: THE STENCIL COLLECTION, LLC

Current Principal Place of Business:

2701 NORTH WOODLAND BLVD
DELAND, FL 32724

New Principal Place of Business:

Current Mailing Address:

3627 ROYAL FERN CIRCLE
DELAND, FL 32724

New Mailing Address:

FEI Number: 20-3424371 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RISTING, ROBERT P
3627 ROYAL FERN CIRCLE
DELAND, FL 32724 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: PD ( ) Delete
Name: RISTING, ROBERT P
Address: 3627 ROYAL FERN CIRCLE
City-St-Zip: DELAND, FL 32724 US

Title: VPD (X) Delete
Name: RISTING, FRANCES L
Address: 3627 ROYAL FERN CIRCLE
City-St-Zip: DELAND, FL 32724 US

Title: TR ( ) Delete
Name: MAENZA, CORRENE D
Address: 3627 ROYAL FERN CIRCLE
City-St-Zip: DELAND, FL 32724 US

Title: STY ( ) Delete
Name: RISTING, KATHERIN T
Address: 3627 ROYAL FERN CIRCLE
City-St-Zip: DELAND, FL 32724 US

ADDITIONS/CHANGES:

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

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

Title: TR (X) Change ( ) Addition
Name: CAMPBELL, CORRENE D
Address: 3627 ROYAL FERN CIRCLE
City-St-Zip: DELAND, FL 32724 US

Title: VPD (X) Change ( ) Addition
Name: RISTING, KATHERIN T
Address: 3627 ROYAL FERN CIRCLE
City-St-Zip: DELAND, FL 32724 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: CORRENE CAMPBELL TR 01/15/2009

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