

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000082649

FILED
Mar 05, 2009
Secretary of State

Entity Name: BULOVA TECHNOLOGIES ORDNANCE SYSTEMS LLC

Current Principal Place of Business:

ARBOR SHORELINE OFFICE PARK
19337 US 19 N, SUITE 525
CLEARWATER, FL 33764

New Principal Place of Business:

19337 US HIGHWAY 19 N, SUITE 525
SUITE 525
CLEARWATER, FL 33764

Current Mailing Address:

ARBOR SHORELINE OFFICE PARK
19337 US 19 N, SUITE 525
CLEARWATER, FL 33764

New Mailing Address:

19337 US HIGHWAY 19 N
SUITE 525
CLEARWATER, FL 33764

FEI Number: 13-4311957

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: GURBA, STEPHEN L
Address: 101 N. QUEEN STREET
City-St-Zip: LANCASTER, PA 17603

Title: MGR (X) Delete
Name: SCHNEE, CRAIG
Address: 101 NORTH QUEEN STREET
City-St-Zip: LANCASTER, PA 17601

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GURBA, STEPHEN L
Address: 19337 US HIGHWAY 19 N, SUITE 525
City-St-Zip: CLEARWATER, FL 33764

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: STEPHEN L. GURBA

MR

03/05/2009

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