

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000091364

**FILED**  
**Jan 04, 2011**  
**Secretary of State**

**Entity Name:** ACRYLICS + MANUFACTURING, LLC

**Current Principal Place of Business:**

606 SAVAGE CT  
LONGWOOD, FL 32750

**New Principal Place of Business:**

448 COMMERCE WAY  
SUITE 108  
LONGWOOD, FL 32750

**Current Mailing Address:**

606 SAVAGE CT  
LONGWOOD, FL 32750

**New Mailing Address:**

448 COMMERCE WAY  
SUITE 108  
LONGWOOD, FL 32750

**FEI Number:** 11-3758607

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JOHNSON, SUSAN E  
614 HATTAWAY DRIVE  
ALTAMONTE SPRINGS, FL 32701 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:** MGRM  
**Name:** JOHNSON, SUSAN E  
**Address:** 614 HATTAWAY DRIVE  
**City-St-Zip:** ALTAMONTE SPRINGS, FL 32701

**Title:** MGR  
**Name:** MAMULA, JEFFREY  
**Address:** 1775 1/2 LYNDAL BLVD  
**City-St-Zip:** MAITLAND, FL 32751

I hereby 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:** JEFFREY MAMULA

MGR

01/04/2011

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