

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000039509

**FILED**  
**Mar 28, 2010**  
**Secretary of State**

**Entity Name:** QUALITY ASSURANCE MACHINING AND DESIGN LLC

**Current Principal Place of Business:**

8416 EAST BAY BLVD  
HOLLY NAVARRE, FL 32566

**New Principal Place of Business:**

**Current Mailing Address:**

8416 EAST BAY BLVD  
HOLLY NAVARRE, FL 32566

**New Mailing Address:**

**FEI Number:** 20-4406117

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

LUEBBERS, YOL-ANNE  
5320 CATALINA ST  
PACE, FL 32571 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  
Name: LUEBBERS, YOL-ANNE  
Address: 5320 CATALINA ST.  
City-St-Zip: PACE, FL 32571

Title: MGR  
Name: LUEBBERS, WILLIAM F  
Address: 5320 CATALINA ST  
City-St-Zip: PACE, FL 32571

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: YOL-ANNE LUEBBERS

MGR

03/28/2010

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