

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000070182

Entity Name: ABSOLUTE COATING, LLC

FILED
Apr 27, 2009
Secretary of State

Current Principal Place of Business:

415 GUS HIPP BLVD.
ROCKLEDGE, FL 32955 US

New Principal Place of Business:

Current Mailing Address:

415 GUS HIPP BLVD.
ROCKLEDGE, FL 32955 US

New Mailing Address:

FEI Number: 20-5201197

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SZCZEPANSKI, PAUL
105 ISLAND VIEW DRIVE
INDIAN HARBOUR BEACH, FL 32937 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: SZCZEPANSKI, PAUL
Address: 415 GUS HIPP BOULEVARD
City-St-Zip: ROCKLEDGE, FL 32955 US

Title: MGR () Delete
Name: VISI, TITO C
Address: 415 GUS HIPP BOULEVARD
City-St-Zip: ROCKLEDGE, FL 32955 US

Title: MGR () Delete
Name: STEPKO, MOLLY
Address: 415 GUS HIPP BOULEVARD
City-St-Zip: ROCKLEDGE, FL 32955 US

Title: MGR () Delete
Name: NAPOLITANO, PHILLIP
Address: 415 GUS HIPP BOULEVARD
City-St-Zip: ROCKLEDGE, FL 32955 US

ADDITIONS/CHANGES:

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

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

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

Title: MGR (X) Change () Addition
Name: NAPOLITANO, PHILIP A
Address: 415 GUS HIPP BOULEVARD
City-St-Zip: ROCKLEDGE, FL 32955 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: PAUL SZCZEPANSKI

MGR

04/27/2009

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