

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000078847

FILED  
Mar 19, 2009  
Secretary of State

Entity Name: CYBER GRAPHICS INDUSTRIES, LLC

**Current Principal Place of Business:**

2433 THOMAS DRIVE  
332  
PANAMA CITY BEACH, FL 32408 US

**New Principal Place of Business:**

**Current Mailing Address:**

2433 THOMAS DRIVE  
332  
PANAMA CITY BEACH, FL 32408 US

**New Mailing Address:**

FEI Number: 20-5355941      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

HUBIN, PATRICK C  
2433 THOMAS DRIVE PMB  
332  
PANAMA CITY BEACH, FL 32408 US

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

WASHINGTON, ANTHONY C  
2433 THOMAS DRIVE PMB  
332  
PANAMA CITY BEACH, FL 32408 US

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: ANTHONY C. WASHINGTON

03/19/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MR ( ) Delete  
Name: HUBIN, PATRICK C  
Address: 2433 THOMAS DR 332  
City-St-Zip: PANAMA CITY BEACH, FL 32408 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

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

Title: MR ( ) Change (X) Addition  
Name: WASHINGTON, ANTHONY C  
Address: 2433 THOMAS DR 332  
City-St-Zip: PANAMA CITY BEACH, FL 32408 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: ANTHONY C. WASHINGTON

MR

03/19/2009

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