2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 16, 2009
Secretary of State

DOCUMENT# L06000079434

Entity Name: TRIPLE DIAMOND GLASS PRODUCTS, LLC

Current Principal Place of Business:

105 TRIPLE DIAMOND BOULEVARD, SUITE 101
NORTH VENICE, FL 34275

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1967
NOKOMIS, FL 342741967

New Mailing Address:

FEI Number: 20-5473309 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HOSTETLER, PAUL
105 TRIPLE DIAMOND BOULEVARD, SUITE 101
NORTH VENICE, FL 34275 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 ( ) Delete
Name: HOSTETLER, PAUL E
Address: 105 TRIPLE DIAMOND BLVD #101
City-St-Zip: NORTH VENICE, FL 34274

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

ADDITIONS/CHANGES:

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

Title: MISS ( ) Change (X) Addition
Name: BARTEK, ALICIA
Address: 2501 NE 15TH TERRACE
City-St-Zip: POMPANO, FL 33064

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 HOSTETLER RA 04/16/2009

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