2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000084749



FILED Mar 17, 2008 8:00 am Secretary of State 03-17-2008 90261 025 ***143.75

NEW COMPOUND TECHNOLOGY LLC								03-17-2000	70 20 1 0.	25 145	.75
Principal Place of Business 14 OAK BLUFF LANE ORMOND BEACH, FL 32174 US			Mailing Address 14 OAK BLUFF LANE ORMOND BEACH, FL 32174		US		UU	AT9T(D			
2. Principal P	Place of Busin	ness - No P.O. Box #	3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.				02112008	Chg-LLC	CR2E	:083 (12/ 0 6)	
City & State			City & State				4. FEI Numbe 20-544				pplied For ot Applicable
Zip			Zip Count		try			of Status Desired	X	\$5.00 Ad Fee Require	
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent						
FRIEBIS, I	DANIELS				Name		MAR		MU.	5	
3890 TUR SUITE B					Street Add	lress (F	O. Box Number	er is Not Acceptable	e)L AA		
PORT OR	ANGE, FL	. 32127			City O			0 6		Zip Coo	10
					01		OND	Beach	F	- 32	2174_
	named entity tions of regist		r the purpose of changing its	register	ed office or re	egistere	ed agent, or bo	th, in the State of FI	orida. Ian	n familiar with	, and accept
SIGNATURE .	Signature, typed	UCAPE C or printed name of registered agent a	nd title if applicable. (NOTE	: Registere	d Agent signature i	required v	when reinstating)	3/	DATE	78	
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75											
										payable to ment of Stat	te
				10.					a Departr	ment of Stat	t e
After May		Fee will be \$538.75		10. TITLE				Florid	a Departr	ment of Stat	te Addition
9. TITLE NAME	MGRM RASMUS	MANAGING MEMBE , TAMARA	RS/MANAGERS	TITLE	E			Florid	a Departr	ment of Star	
9. TITLE NAME STREET ADDRESS	MGRM RASMUS 14 OAK B	MANAGING MEMBE TAMARA BLUFF LANE	RS/MANAGERS	TITLE NAM STRE	ET ADDRESS	-		Florid	a Departr	ment of Star	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RASMUS 14 OAK B ORMOND	MANAGING MEMBE , TAMARA	RS/MANAGERS Delete	TITLE NAM STRE CITY	E ET ADDRESS -ST-ZIP			Florid	a Departr	S Change	☐ Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MGRM RASMUS 14 OAK B ORMOND MGRM	MANAGING MEMBE TAMARA LUFF LANE BEACH, FL 32174	RS/MANAGERS	TITLE NAM STRE CITY TITLE	E ET ADDRESS -ST-ZIP			Florid	a Departr	ment of Star	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RASMUS 14 OAK B ORMOND MGRM RASMUS	MANAGING MEMBE TAMARA LUFF LANE BEACH, FL 32174	RS/MANAGERS Delete	TITLE NAM STRE CITY TITLE NAM	E ET ADDRESS -ST-ZIP			Florid	a Departr	S Change	☐ Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MGRM RASMUS 14 OAK B ORMONE MGRM RASMUS 14 OAK B	MANAGING MEMBE TAMARA LUFF LANE BEACH, FL 32174 JOHN	RS/MANAGERS Delete	TITLE NAM STRE CITY TITLE NAM STRE	ET ADDRESS -ST-ZIP			Florid	a Departr	S Change	☐ Addition
9. IITLE NAME STREET ADDRESS CITY-ST-ZIP IITLE NAME STREET ADDRESS	MGRM RASMUS 14 OAK B ORMONE MGRM RASMUS 14 OAK B	MANAGING MEMBE TAMARA LUFF LANE BEACH, FL 32174 JOHN BLUFF LANE	RS/MANAGERS Delete	TITLE NAM STRE CITY TITLE NAM STRE	E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP			Florid	a Departr	S Change	☐ Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TREET ADDRESS CITY-ST-ZIP TITLE NAME	MGRM RASMUS 14 OAK B ORMONE MGRM RASMUS 14 OAK B	MANAGING MEMBE TAMARA LUFF LANE BEACH, FL 32174 JOHN BLUFF LANE	RS/MANAGERS Delete Delete	TITLE NAM STRE CITY TITLE NAM STRE CITY TITLE NAM NAM NAM	E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZiP E E ET ADDRESS -ST-ZiP			Florid	a Departr	S Change	Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MGRM RASMUS 14 OAK B ORMONE MGRM RASMUS 14 OAK B	MANAGING MEMBE TAMARA LUFF LANE BEACH, FL 32174 JOHN BLUFF LANE	RS/MANAGERS Delete Delete	TITLE NAM STRE CITY TITLE NAM STRE CITY TITLE NAM STRE	E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-Z/P E E E ET ADDRESS E E ET ADDRESS			Florid	a Departr	S Change	Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TREET ADDRESS CITY-ST-ZIP TITLE NAME	MGRM RASMUS 14 OAK B ORMONE MGRM RASMUS 14 OAK B	MANAGING MEMBE TAMARA LUFF LANE BEACH, FL 32174 JOHN BLUFF LANE	RS/MANAGERS Delete Delete	TITLE NAM STRE CITY TITLE NAM STRE CITY TITLE NAM STRE	E ET ADDRESSST-ZIP E E E ET ADDRESSST-Z/P E E E E ET ADDRESSST-Z/P E E E E ET ADDRESSST-ZIP			Florid	a Departr	S Change	Addition
9. IITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP	MGRM RASMUS 14 OAK B ORMONE MGRM RASMUS 14 OAK B	MANAGING MEMBE TAMARA LUFF LANE BEACH, FL 32174 JOHN BLUFF LANE	RS/MANAGERS Delete Delete	TITLE NAM STRE CITY TITLE NAM STRE CITY TITLE NAM STRE CITY CITY	E ET ADDRESSST-ZIP E E			Florid	a Departr	S Change	Addition Addition
9. IITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	MGRM RASMUS 14 OAK B ORMONE MGRM RASMUS 14 OAK B	MANAGING MEMBE TAMARA LUFF LANE BEACH, FL 32174 JOHN BLUFF LANE	RS/MANAGERS Delete Delete	TITLE NAM STRE CITY TITLE NAM STRE CITY TITLE NAM STRE CITY NAM STRE CITY TITLE NAM STRE	E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-Z/P E E ET ADDRESS -ST-Z/P E E ET ADDRESS -ST-ZIP E E ET ADDRESS	-		Florid	a Departr	S Change	Addition Addition
9. IITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MGRM RASMUS 14 OAK B ORMONE MGRM RASMUS 14 OAK B	MANAGING MEMBE TAMARA LUFF LANE BEACH, FL 32174 JOHN BLUFF LANE	RS/MANAGERS Delete Delete Delete	TITLE NAM STRE CITY TITLE NAM STRE CITY TITLE NAM STRE CITY NAM STRE CITY TITLE NAM STRE	E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-Z/P E E ET ADDRESS -ST-Z/P E E ET ADDRESS -ST-ZIP			Florid	a Departr	S Change Change	Addition Addition Addition
9. IITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE	MGRM RASMUS 14 OAK B ORMONE MGRM RASMUS 14 OAK B	MANAGING MEMBE TAMARA LUFF LANE BEACH, FL 32174 JOHN BLUFF LANE	RS/MANAGERS Delete Delete	TITLE NAM STRE CITY TITLE NAM STRE CITY TITLE NAM STRE CITY TITLE NAM STRE CITY TITLE	E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP			Florid	a Departr	S Change	Addition Addition
9. IITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MGRM RASMUS 14 OAK B ORMONE MGRM RASMUS 14 OAK B	MANAGING MEMBE TAMARA LUFF LANE BEACH, FL 32174 JOHN BLUFF LANE	RS/MANAGERS Delete Delete Delete	TITLE NAM STRE CITY	E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP			Florid	a Departr	S Change Change	Addition Addition Addition
9. IITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE	MGRM RASMUS 14 OAK B ORMONE MGRM RASMUS 14 OAK B	MANAGING MEMBE TAMARA LUFF LANE BEACH, FL 32174 JOHN BLUFF LANE	RS/MANAGERS Delete Delete Delete	TITLE NAM STRE CITY	E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP			Florid	a Departr	S Change Change	Addition Addition Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MGRM RASMUS 14 OAK B ORMONE MGRM RASMUS 14 OAK B	MANAGING MEMBE TAMARA LUFF LANE BEACH, FL 32174 JOHN BLUFF LANE	RS/MANAGERS Delete Delete Delete Delete	TITLE NAM STRE CITY	E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP			Florid	a Departr	S Change Change	Addition Addition Addition
9. IITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RASMUS 14 OAK B ORMONE MGRM RASMUS 14 OAK B	MANAGING MEMBE TAMARA LUFF LANE BEACH, FL 32174 JOHN BLUFF LANE	RS/MANAGERS Delete Delete Delete	TITLE NAM STRE CITY	E ET ADDRESS -ST-ZIP : E E E ET ADDRESS -ST-ZIP : E E E ET ADDRESS -ST-ZIP : E E E E ET ADDRESS -ST-ZIP : E E E ET ADDRESS -ST-ZIP : E E E E E E E E E E E E E E E E E E			Florid	a Departr	S Change Change Change	Addition Addition Addition Addition
9. IITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MGRM RASMUS 14 OAK B ORMONE MGRM RASMUS 14 OAK B	MANAGING MEMBE TAMARA LUFF LANE BEACH, FL 32174 JOHN BLUFF LANE	RS/MANAGERS Delete Delete Delete Delete	TITLE NAM STRE CITY	E ET ADDRESS -ST-ZIP : E E E ET ADDRESS -ST-ZIP : E E E ET ADDRESS -ST-ZIP : E E E E ET ADDRESS -ST-ZIP : E E E ET ADDRESS -ST-ZIP : E E E E E E E E E E E E E E E E E E			Florid	a Departr	S Change Change Change	Addition Addition Addition Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.