

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000117240

FILED
Jul 10, 2008
Secretary of State

Entity Name: SCHWARZ PARTNERS PACKAGING, LLC

Current Principal Place of Business:

5505 WEST 74TH STREET
INDIANAPOLIS, IN 46268

New Principal Place of Business:

Current Mailing Address:

5505 WEST 74TH STREET
INDIANAPOLIS, IN 46268

New Mailing Address:

FEI Number: 20-5239639 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

SCHWARZ, JACK W
540 HARBOR POINT ROAD
LONGBOAT KEY, FL 34228 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SCHWARZ, JACK W
Address: 5505 WEST 74TH STREET
City-St-Zip: INDIANAPOLIS, IN 46268

Title: MGRM () Delete
Name: SCHWARZ, JOHN
Address: 5505 WEST 74TH STREET
City-St-Zip: INDIANAPOLIS, IN 46268

Title: MGRM () Delete
Name: SCHWARZ, JEFFREY
Address: 5505 WEST 74TH STREET
City-St-Zip: INDIANAPOLIS, IN 46268

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:

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: JEFFREY SCHWARZ

MGRM

07/10/2008

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