

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000033118

FILED  
Apr 30, 2009  
Secretary of State

**Entity Name:** PRODUCT QUEST MANUFACTURING, LLC

**Current Principal Place of Business:**

330 CARSWELL AVENUE  
HOLLY HILL, FL 32117 US

**New Principal Place of Business:**

**Current Mailing Address:**

330 CARSWELL AVENUE  
HOLLY HILL, FL 32117 US

**New Mailing Address:**

**FEI Number:** 20-8734401

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

REGAN, JOHN  
330 CARSWELL AVENUE  
HOLLY HILL, FL 32117 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: REGAN, JOHN T  
Address: 330 CARSWELL AVENUE  
City-St-Zip: HOLLY HILL, FL 32117 US

Title: MGR ( ) Delete  
Name: KWAIT, TODD  
Address: 23230 CHAGRIN BLVD., STE 340  
City-St-Zip: CLEVELAND, OH 44122 US

Title: MGR ( ) Delete  
Name: STRAUSS, NOEL  
Address: 111 CENTER STREET, STE 2500  
City-St-Zip: LITTLE ROCK, AR 72201 US

Title: MGR ( ) Delete  
Name: MARTIN, DOUGLAS H  
Address: 111 CENTER STREET, STE. 2500  
City-St-Zip: LITTLE ROCK, AR 72201 US

Title: MGR ( ) Delete  
Name: BLANK, RICK  
Address: 111 CENTER STREET, STE. 2500  
City-St-Zip: LITTLE ROCK, AR 72201 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: ( ) 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:** JOHN REGAN

MGR

04/30/2009

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