

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000010558

Entity Name: TECHNICORP REPAIR LLC

FILED
Mar 17, 2009
Secretary of State

Current Principal Place of Business:

646 EYSTER BOULEVARD
ROCKLEDGE, FL 32955

New Principal Place of Business:

Current Mailing Address:

646 EYSTER BOULEVARD
ROCKLEDGE, FL 32955

New Mailing Address:

FEI Number: 26-1882584

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PICKLES, TIMOHTY F
3490 N. US HWY 1
COCOA, FL 32926 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: TOMASULO, WALTER
Address: 646 EYSTER BOULEVARD
City-St-Zip: ROCKLEDGE, FL 32955

Title: MGRM () Delete
Name: STUART, COLLEEN M
Address: 646 EYSTER BOULEVARD
City-St-Zip: ROCKLEDGE, FL 32955

ADDITIONS/CHANGES:

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: COLLEEN M. STUART

MGRM

03/17/2009

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