

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000034554

Entity Name: ALL REALM GRAPHICS LLC

FILED
May 01, 2009
Secretary of State

Current Principal Place of Business:

2506 AMERICAS CUP COURT
ATLANTIC BEACH, FL 32233 US

New Principal Place of Business:

2287
TWIN FOX TRAIL BUILDING 3
ST. AUGUSTINE, FL 32086 US

Current Mailing Address:

PO BOX 330985
ATLANTIC BEACH, FL 32233 US

New Mailing Address:

2287
TWIN FOX TRAIL BUILDING 3
ST. AUGUSTINE, FL 32086 US

FEI Number: 61-1551889 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

HASTINGS, PAULA
2506 AMERICAS CUP COURT
ATLANTIC BEACH, FL 32233 US

Name and Address of New Registered Agent:

HASTINGS, PAULA MGRM
2287
TWIN FOX TRAIL BUILDING 3
ST. AUGUSTINE, FL 32086 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: PAULA HASTINGS

05/01/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

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

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

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

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: PAULA REYNOLDS
Address: PO BOX 330985
City-St-Zip: ATLANTIC BEACH, FL 32233 US

Title: MGRM () Change (X) Addition
Name: HARLEY L COLBERT
Address: PO BOX 330985
City-St-Zip: ATLANTIC BEACH, FL 32233 US

Title: MGRM () Change (X) Addition
Name: ROBBIE L COLBERT
Address: PO BOX 330985
City-St-Zip: ATLANTIC BEACH, FL 32233 US

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: PAULA HASTINGS

MGRM

05/01/2009

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