

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000047757

FILED  
May 28, 2009  
Secretary of State

Entity Name: FULL MOON SIGNSHOP, LLC.

**Current Principal Place of Business:**

1029 N. FLORIDA MANGO RD.  
SUITE #10  
WEST PALM BEACH, FL 33409 US

**New Principal Place of Business:**

**Current Mailing Address:**

2321 SEMINOLE BLVD.  
WEST PALM BEACH, FL 33409 US

**New Mailing Address:**

1029 N. FLORIDA MANGO RD.  
SUITE #10  
WEST PALM BEACH, FL 33409 US

FEI Number: 26-2609192      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:**

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

AMERICAN SAFETY COUNCIL, INC.  
5125 ADANSON ST.  
SUITE 500  
ORLANDO, FL 32804 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:**

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Delete  
Name: SOUDERS, LAWRENCE  
Address: 2321 SEMINOLE BLVD.  
City-St-Zip: WEST PALM BEACH, FL 33409 US

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: LAWRENCE J. SOUDERS

MGRM

05/28/2009

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