

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000055970

FILED
Apr 27, 2009
Secretary of State

Entity Name: NAI PRINT SOLUTIONS, LLC

Current Principal Place of Business:

457 STRANDVIEW DRIVE
PENSACOLA, FL 32534

New Principal Place of Business:

Current Mailing Address:

457 STRANDVIEW DRIVE
PENSACOLA, FL 32534

New Mailing Address:

FEI Number: 26-2819622

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WICKIZER, TARIS
457 STRANDVIEW DRIVE
PENSACOLA, FL 32534 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: WICKIZER, TARIS
Address: 457 STRANDVIEW DRIVE
City-St-Zip: PENSACOLA, FL 32534

Title: MGRM () Delete
Name: WICKIZER, MONA
Address: 230 NORTH KNIGHTSTOWN ROAD
City-St-Zip: SHELBYVILLE, IN 46176

Title: MGRM () Delete
Name: WICKIZER, GREGORY
Address: 230 NORTH KNIGHTSDOWN RD.
City-St-Zip: SHELBYVILLE, IN 46176

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: WICKIZER, MONA
Address: 230 NORTH KNIGHTSTOWN ROAD
City-St-Zip: SHELBYVILLE, IN 46176

Title: MGRM (X) Change () Addition
Name: WICKIZER, GREGORY
Address: 230 NORTH KNIGHTSTOWN ROAD
City-St-Zip: SHELBYVILLE, IN 46176

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: TARIS WICKIZER

MGRM

04/27/2009

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