

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000063229

FILED  
Jun 16, 2009  
Secretary of State

Entity Name: UNITED SPRAYFOAM, LLC

## Current Principal Place of Business:

2221 BLUE SPRINGS ROAD  
WEST PALM BEACH, FL 33411 US

## New Principal Place of Business:

480 TALL PINES ROAD  
UNIT I  
WEST PALM BEACH, FL 33413 US

## Current Mailing Address:

2221 BLUE SPRINGS ROAD  
WEST PALM BEACH, FL 33411 US

## New Mailing Address:

480 TALL PINES ROAD  
UNIT I  
WEST PALM BEACH, FL 33413 US

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

FLINT, ALBERT R  
2221 BLUE SPRINGS ROAD  
WEST PALM BEACH, FL 33411 US

## Name and Address of New Registered Agent:

BUCKO, ZSOLT  
480 TALL PINES ROAD  
UNIT I  
WEST PALM BEACH, FL 33413 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: ZSOLT BUCKO

06/16/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: FLINT, ALBERT  
Address: 2221 BLUE SPRINGS ROAD  
City-St-Zip: WEST PALM BEACH, FL 33411 US

Title: MGRM ( ) Delete  
Name: GALAMBOS, TIBOR  
Address: 2221 BLUE SPRINGS ROAD  
City-St-Zip: WEST PALM BEACH, FL 33411 US

Title: MGRM ( ) Delete  
Name: RINGROSE, MICHAEL  
Address: 2221 BLUE SPRINGS ROAD  
City-St-Zip: WEST PALM BEACH, FL 33411 US

Title: MGRM ( ) Delete  
Name: HAUSTVEIT, INC.  
Address: 2221 BLUE SPRINGS ROAD  
City-St-Zip: WEST PALM BEACH, FL 33411 US

Title: MGRM ( ) Delete  
Name: KUNFALVI, MARTON  
Address: 2221 BLUE SPRINGS ROAD  
City-St-Zip: WEST PALM BEACH, FL 33411 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: ZSOLT BUCKO

RA

06/16/2009

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