

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000004222

**FILED**  
**Apr 27, 2011**  
**Secretary of State**

**Entity Name:** FILTER MAXX, LLC

**Current Principal Place of Business:**

3780 KORI ROAD, NO. 178  
JACKSONVILLE, FL 32287

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 600711  
JACKSONVILLE, FL 322600711

**New Mailing Address:**

**FEI Number:** 26-4067283

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

CHASTAIN, STEPHEN  
2925 MANDARIN MEADOWS SOUTH  
JACKSONVILLE, FL 32223 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:** MGR  
**Name:** CHASTAIN, STEPHEN  
**Address:** 2925 MANDARIN MEADOWS SOUTH  
**City-St-Zip:** JACKSONVILLE, FL 32223

**Title:** MGR  
**Name:** CHASTAIN, LOGAN T  
**Address:** 2925 MANDARIN MEADOWS SOUTH  
**City-St-Zip:** JACKSONVILLE, FL 32223

I hereby 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:** STEPHEN CHASTAIN

MGR

04/27/2011

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