

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000037231

Entity Name: MIKRIT, LLC

**FILED**  
**Jul 13, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

5880 SW 64 STREET ROAD  
OCALA, FL 34474

**New Principal Place of Business:**

**Current Mailing Address:**

5880 SW 64 STREET ROAD  
OCALA, FL 34474

**New Mailing Address:**

58 TURGEON AVE  
DRACUT, MA 01826

FEI Number: 27-1256045

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

COAN, RUSSELL F  
5880 SW 64 STREET ROAD  
OCALA, FL 34474 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: CEO  
Name: COAN, MICHAEL P  
Address: 58 TURGEON AVE  
City-St-Zip: DRACUT, MA 01826

Title: CFO  
Name: COAN, RITA T  
Address: 58 TURGEON AVE  
City-St-Zip: DRACUT, MA 01826

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: MICHAEL P. COAN

CEO

07/13/2010

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