

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000060704

**FILED**  
**Mar 12, 2012**  
**Secretary of State**

**Entity Name:** SCHINDLER DEFENSE FULFILLMENT, LLC

**Current Principal Place of Business:**

4330 1/2 SOUTH MANHATTAN AVE  
TAMPA, FL 33611

**New Principal Place of Business:**

4336 SOUTH MANHATTAN AVE  
TAMPA, FL 33611

**Current Mailing Address:**

4330 1/2 SOUTH MANHATTAN AVE  
TAMPA, FL 33611

**New Mailing Address:**

4336 SOUTH MANHATTAN AVE  
TAMPA, FL 33611

**FEI Number:** 27-0514793

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MAYTS, ANDREW J JR  
201 N FRANKLIN ST  
TAMPA, FL 33602 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: PRES  
Name: SCHINDLER, KELLY -  
Address: 4336 SOUTH MANHATTAN AVENUE  
City-St-Zip: TAMPA, FL 33611

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: KELLY SCHINDLER

PRES

03/12/2012

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