

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000084000

**FILED**  
**Feb 09, 2010**  
**Secretary of State**

**Entity Name:** THE US SOLAR INSTITUTE, LLC

**Current Principal Place of Business:**

17128 FLYING FISH LANE  
SUGARLOAF KEY, FL 33042 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1821  
KEY WEST, FL 33041 US

**New Mailing Address:**

**FEI Number:** 27-0933856

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

JOHNSON, RAYMOND E  
17128 FLYING FISH LANE  
SUGARLOAF KEY, FL 33042 US

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

JOHNSON, RAY  
17128 FLYING FISH LANE  
SUGARLOAF KEY, FL 33042 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: RAYMOND E JOHNSON

02/09/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: JOHNSON, RAYMOND E  
Address: PO BOX 1821  
City-St-Zip: KEY WEST, FL 33041 FL

Title: MGMR  
Name: CUSICK, SHARON  
Address: 6423 FIRETHORN AVE  
City-St-Zip: REYNOLDSBURG, OH 43068

Title: MGRM  
Name: MESSING, SCOTT  
Address: 9881 HAVERFORD PLACE  
City-St-Zip: PICKERINGTON, OH 43147

Title: MGRM  
Name: JOHNSON, POLLY  
Address: 2300 INVERNESS COURT  
City-St-Zip: ORLANDO, FL 32806

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: RAYMOND E JOHNSON

MGRM

02/09/2010

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