

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000098333

**FILED**  
**Mar 15, 2011**  
**Secretary of State**

**Entity Name:** DR SCREEN AND MR SPLINE LLC

**Current Principal Place of Business:**

821 SW 29TH ST  
CAPE CORAL, FL 33914

**New Principal Place of Business:**

**Current Mailing Address:**

821 SW 29TH ST  
CAPE CORAL, FL 33914

**New Mailing Address:**

**FEI Number:** 12-3588998

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHULL, JOSEPH J  
821 SW 29TH ST  
CAPE CORAL, FL 33914 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: P  
Name: SHULL, JOSEPH J  
Address: 821 SW 29TH ST  
City-St-Zip: CAPE CORAL, FL 33914

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: JOSEPH J SHULL

MGR

03/15/2011

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