

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000127685

FILED
May 01, 2012
Secretary of State

Entity Name: FINGER SHIELD SAFETY PRODUCTS LLC.

Current Principal Place of Business:

10042 SAWGRASS DR. W
PONTE VEDRA BEACH, FL 32082

New Principal Place of Business:

Current Mailing Address:

13833 WEEPING WILLOW WAY
JACKSONVILLE, FL 32224

New Mailing Address:

151 SAWGRASS CORNERS DR #218
PONTE VEDRA BEACH, FL 32082

FEI Number: 90-0643120

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TONDI, MARIA
13833 WEEPING WILLOW WAY
JACKSONVILLE, FL 32224 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: TONDI, MARIA
Address: 13833 WEEPING WILLOW WAY
City-St-Zip: JACKSONVILLE, FL 32224

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: MARIA TONDI

MGR

05/01/2012

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