

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000002334

**FILED**  
**Apr 28, 2012**  
**Secretary of State**

**Entity Name:** ATLANTIC PINSTRIPING OF N.E. FLORIDA, "LLC."

**Current Principal Place of Business:**

42 LOGGERHEAD LANE  
ED VOGLER-ATLANTIC PINSTRIPING  
PONTE VEDRA BEACH, FL 32082

**New Principal Place of Business:**

42 LOGGERHEAD LANE  
ED VOGLER-ATLANTIC PINSTRIPING  
PONTE VEDRA BEACH, FL 32082 UN

**Current Mailing Address:**

42 LOGGERHEAD LANE  
ED VOGLER-ATLANTIC PINSTRIPING  
PONTE VEDRA BEACH, FL 32082

**New Mailing Address:**

**FEI Number:** 80-0563673      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

VOGLER, ED  
42 LOGGERHEAD LANE  
PONTE VEDRA BEACH, FL 32082 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:** MGRM  
**Name:** VOGLER, ED  
**Address:** 42 LOGGERHEAD LANE  
**City-St-Zip:** PONTE VEDRA BEACH, FL 32082

**Title:** MGRM  
**Name:** VOGLER, MARY  
**Address:** 42 LOGGERHEAD LANE  
**City-St-Zip:** PONTE VEDRA BEACH, FL 32082

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: ED VOGLER

MGRM

04/28/2012

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