

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000073004

**FILED**  
**Apr 20, 2012**  
**Secretary of State**

**Entity Name:** SYMONS DISTRIBUTION, LLC

**Current Principal Place of Business:**

13756 CRYSTAL RIVER DR  
ORLANDO, FL 32828

**New Principal Place of Business:**

13756 CRYSTAL RIVER DR  
ORLANDO, FL 32828 US

**Current Mailing Address:**

13756 CRYSTAL RIVER DR  
ORLANDO, FL 32828

**New Mailing Address:**

13756 CRYSTAL RIVER DRIVE  
ORLANDO, FL 32828 US

**FEI Number:** 45-2591626

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

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

SYMONS, WALTER S MR  
13756 CRYSTAL RIVER DRIVE  
ORLANDO, FL 32828 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: MR WALTER S. SYMONS

04/20/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SYMONS, WALTER S  
Address: 13756 CRYSTAL RIVER DR  
City-St-Zip: ORLANDO, FL 32828 US

Title: MGRM  
Name: SYMONS, ELEANOR M  
Address: 13756 CRYSTAL RIVER DR  
City-St-Zip: ORLANDO, FL 32828 US

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: WALTER S. SYMONS

MGRM

04/20/2012

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