

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M01000001983

Entity Name: CELLXION, LLC

**FILED**  
**May 12, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

5031 HAZEL JONES RD.  
BOSSIER CITY, LA 71111

**New Principal Place of Business:**

**Current Mailing Address:**

5031 HAZEL JONES RD.  
BOSSIER CITY, LA 71111

**New Mailing Address:**

FEI Number: 72-1333762      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

SCHOONOVER, STEVEN L  
24 SCHOONS WAY  
SANTA ROSA BEACH, FL 32459      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SABRE INDUSTRIES, INC  
Address: 1120 WELSH RD, STE 210  
City-St-Zip: NORTH WALES, PA 19454

Title: MGR  
Name: DEAN, JAMES L  
Address: 5031 HAZEL JONES RD  
City-St-Zip: BOSSIER CITY, LA 71111

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: TINA WARE

ACCT

05/12/2010

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