

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000002954

FILED  
Jan 10, 2004  
Secretary of State

Entity Name: VECTOR CONTROL SOLUTIONS, LLC

**Current Principal Place of Business:**

2800 S. FINANCIAL CT.  
SANFORD, FL 32773

**New Principal Place of Business:**

**Current Mailing Address:**  
2800 S. FINANCIAL CT.  
SANFORD, FL 32773

**New Mailing Address:**

FEI Number: 05-0576681      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

WOOLDRIDGE, ALLEN W JR  
C/O ADAPCO, INC.  
2800 S. FINANCIAL CT.  
SANFORD, FL 32773 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/MEMBERS:**

Title: MGRM ( ) Delete  
Name: ADAPCO, INC.,  
Address: 2800 S. FINANCIAL CT.  
City-St-Zip: SANFORD, FL 32773

Title: MGRM ( ) Delete  
Name: RD, INC.,  
Address: 23 HILLSIDE DRIVE  
City-St-Zip: WINNEBAGO, MN 56098

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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: ALLEN W. WOOLDRIDGE, JR.

MGRM

01/10/2004

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