# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Mar 14, 2011**
**Secretary of State**

DOCUMENT# M04000003029

**Entity Name:** CL COATINGS, LLC

**Current Principal Place of Business:**

8450 W 191ST STREET
UNIT 19
MOKENA, IL 60448

**New Principal Place of Business:**

**Current Mailing Address:**

8450 W 191ST STREET
UNIT 19
MOKENA, IL 60448

**New Mailing Address:**

**FEI Number: 20-1396269** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: DELANGE, ALLAN
Address: 8450 W 191ST STREET
City-St-Zip: MOKENA, IL 60448

Title: MGR
Name: SOURBIS, SKOPIOTIS(JIM)
Address: 8450 W 191ST STREET
City-St-Zip: MOKENA, IL 60448

Title: MGR
Name: MANIAS, NIKITAS
Address: 8450 W 191ST STREET
City-St-Zip: MOKENA, IL 60448

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 Statues.

SIGNATURE: ALLAN DELANGE MGR 03/14/2011

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