

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M05000003785

**FILED**  
**Jan 08, 2012**  
**Secretary of State**

**Entity Name:** THE MCKINNON, LLC

**Current Principal Place of Business:**

21950 HOOVER ROAD  
WARREN, MI 480893778

**New Principal Place of Business:**

4383 GREEN DRIVE  
HARSENS ISLAND, MI 48028

**Current Mailing Address:**

21950 HOOVER ROAD  
WARREN, MI 480893778

**New Mailing Address:**

4383 GREEN DRIVE  
HARSENS ISLAND, MI 48028

**FEI Number:** 20-3017583

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

COX, JAMES C  
3709 WOODLAKE DRIVE  
BONITA SPRINGS, FL 34134 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:** DECKER, JAMES E  
**Address:** 4383 GREEN DRIVE  
**City-St-Zip:** HARSENS ISLAND, MI 48028

**Title:** MS.  
**Name:** DECKER, ERIKA A  
**Address:** 9713 ROUNDSTONE CIRCLE  
**City-St-Zip:** FT. MYERS, FL 33967

**Title:** MR.  
**Name:** DECKER, WILLIAM M  
**Address:** 4383 GREEN DRIVE  
**City-St-Zip:** HARSENS ISLAND, MI 48028

**Title:** MS,  
**Name:** DECKER, EMILY E  
**Address:** 4383 GREEN DRIVE  
**City-St-Zip:** HARSENS ISLAND, MI 48028

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:** JAMES E.DECKER

MGRM

01/08/2012

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