

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000006276

FILED
Apr 22, 2009
Secretary of State

Entity Name: MDC VACUUM PRODUCTS, LLC

Current Principal Place of Business:

23842 CABOT BLVD.
HAYWARD, CA 94545

New Principal Place of Business:

Current Mailing Address:

23842 CABOT BLVD.
HAYWARD, CA 94545

New Mailing Address:

FEI Number: 20-3674752 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NATIONAL CORPORATE RESEARCH, LTD., INC.
515 EAST PARK AVE.
TALLAHASSEE, FL 32301 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: CEO () Delete
Name: BROWNELL, JOSEPH MR.
Address: 23842 CABOT BLVD.
City-St-Zip: HAYWARD, CA 94545

Title: CFO () Delete
Name: CULLEN, KEVIN J MR.
Address: 23842 CABOT BLVD.
City-St-Zip: HAYWARD, CA 94545

Title: VP () Delete
Name: DALVIE, SANDEEP K MR.
Address: 23842 CABOT BLVD.
City-St-Zip: HAYWARD, CA 94545

Title: VP (X) Delete
Name: SMOLKA, JOEL H MR.
Address: 23842 CABOT BLVD.
City-St-Zip: HAYWARD, CA 94545

ADDITIONS/CHANGES:

Title: CEO (X) Change () Addition
Name: MARUSIAK, LUKE MR.
Address: 23842 CABOT BLVD.
City-St-Zip: HAYWARD, CA 94545

Title: CFO (X) Change () Addition
Name: KIM, TOM MR.
Address: 23842 CABOT BLVD.
City-St-Zip: HAYWARD, CA 94545

Title: COO (X) Change () Addition
Name: MALLEY, BOB MR.
Address: 23842 CABOT BLVD.
City-St-Zip: HAYWARD, CA 94545

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 Chapter 119, 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: TOM KIM

CFO

04/22/2009

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