2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 10, 2007 08:00 AM
Secretary of State

DOCUMENT # M06000003439

1. Entity Name
ASTRA PRODUCTS OF OHIO, LLC

Principal Place of Business	Mailing Address
7154 STATE ROUTE 88 RAVENNA, OH 44266	7154 STATE ROUTE 88 RAVENNA, OH 44266

DO NOT WRITE IN THIS SPACE

07032007 No Chg-LLC CR2E083 (11/05)

4. FEI Number
34-1961756
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

BMD FLORIDA SERVICES, LLC
76 S. LAURA STREET, SUITE 2110
JACKSONVILLE, FL 32202

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by September 14, 2007

U00000767858
07/10/07-80023-001 55.00

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	KOHL, C. SCOTT
STREET ADDRESS	7154 STATE ROUTE 88
CITY-ST-ZIP	RAVENNA, OH 44266
TITLE	MGRM
NAME	DUGAN, J. BRIAN
STREET ADDRESS	7154 STATE ROUTE 88
CITY-ST-ZIP	RAVENNA, OH 44266
TITLE	MGRM
NAME	SMITH, SUSAN
STREET ADDRESS	7154 STATE ROUTE 88
CITY-ST-ZIP	RAVENNA, OH 44266
TITLE	MGRM
NAME	OBLISK, JOHN
STREET ADDRESS	7154 STATE ROUTE 88
CITY-ST-ZIP	RAVENNA, OH 44266
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: C. Scott Kohl, Finance Director 7/03/07 330-296-0114
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #