2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 16, 2009
Secretary of State

DOCUMENT# M06000006285

Entity Name: CLAMPETT INDUSTRIES LLC

Current Principal Place of Business:

222 SCHILLING CIRCLE, STE 275
HUNT VALLEY, MD 21031

New Principal Place of Business:

Current Mailing Address:

222 SCHILLING CIRCLE, STE 275
HUNT VALLEY, MD 21031

New Mailing Address:

FEI Number: 02-0655997 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HIQ CORPORATE SERVICES, INC.
1574 VILLAGE SQUARE BOULEVARD, SUITE 100
TALLAHASSEE, FL 32309 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	( ) Delete
Name:	RMM HOLDINGS, INC.,	
Address:	222 SCHILLING CIRCLE, STE 275	
City-St-Zip:	HUNT VALLEY, MD 21031	
Title:	MGRM	( ) Delete
Name:	EMG HOLDINGS, LLC,	
Address:	222 SCHILLING CIRCLE, STE 275	
City-St-Zip:	HUNT VALLEY, MD 21031	
Title:	MGR	( ) Delete
Name:	LIMOGES, CLAUDE N CEO	
Address:	222 SCHILLING CIRCLE, STE 275	
City-St-Zip:	HUNT VALLEY, MD 21031	
Title:	MGR	( ) Delete
Name:	MAINS, TIMOTHY SR VP	
Address:	222 SCHILLING CIRCLE, STE 275	
City-St-Zip:	HUNT VALLEY, MD 21031	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 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: TIMOTHY MAINS MGR 01/16/2009

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