

# **2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M08000000787

**FILED**  
**Mar 18, 2009**  
**Secretary of State**

**Entity Name:** SUNCOVE DISTRIBUTION, LLC

**Current Principal Place of Business:**

991 US HWY 22  
STE 200  
BRIDGEWATER, NJ 08807

**New Principal Place of Business:**

**Current Mailing Address:**

991 US HWY 22  
STE 200  
BRIDGEWATER, NJ 08807

**New Mailing Address:**

855 SUNSET RIDGE  
BRIDGEWATER, NJ 08807

**FEI Number:** 26-0361347

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

STANTON, AUGUST J ESQ  
% STANTON AND GASDICK, PA  
390 N ORANGE AVE - STE 260  
ORLANDO, FL 32801 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: COVIELLO, ROBERT P  
Address: 991 US HWY 22 - STE 200  
City-St-Zip: BRIDGEWATER, NJ 08807

**ADDITIONS/CHANGES:**

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:** ROBERT P. COVIELLO

MGRM

03/18/2009

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