

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

0021721

DOCUMENT # **M193000000475**

1. Entity Name

ALLIANT PROPULSION AND COMPOSITES LLC



FILED

03 DEC 26 AM 11:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



☒ CHECK HERE IF MAKING CHANGES

Principal Place of Business
201 S MAIN STREET STE 400
SALT LAKE CITY UT 84111

Mailing Address
201 S MAIN STREET STE 400
SALT LAKE CITY UT 84111

2. Principal Place of Business

3. Mailing Address

5050 Lincoln Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

MN01-3075

City & State

City & State

Edina, MN

Zip

Country

Zip

Country

55436-1097

USA

4. FEI Number **41-1933908**

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Michele Miller
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent Signature Required When Reinstating)

Michele Miller
Assistant Secretary

12/18/03

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By September 24, 2003

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
MEYERS, SCOTT S
75 CLAY CLIFFE
TONKA BAY MN 55331 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
Ann D. Davidson
5050 Lincoln Drive
Edina, MN 55436-1097 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
MILLER, PAUL D
3304 HEATHCOTE LANE
KESWICK VA 22947 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
Jeffrey O. Foote
201 S. Main St., Suite 400
Salt Lake City, UT 84111 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
ROSS, PAUL A
673 N. LITTLE TREE CIRCLE
SALT LAKE CITY UT 84108 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

200025165972
12/02/03--01061--030 ***50.00 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
VLAHAKIS, NICHOLAS G
600 SECOND STREET NE
HOPKINS MN 55343 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

200025165972
12/02/03--01061--031 ***100.00 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
PERRI, A
5912 CROSSEDRA ST SE
PRIOR LAKE MN 55372 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

RECEIVED 03
FAL ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Ann D. Davidson

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

11/24/03

Date

952-351-2869

Daytime Phone #

CF2E083 (4/03)