

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M990000001244

FILED  
Aug 17, 2004  
Secretary of State

**Entity Name:** AMERICAN PRINTWORKS, L.L.C.

**Current Principal Place of Business:**

1000 WEST RAWSON AVENUE  
OAK CREEK, WI 53154

**New Principal Place of Business:**

**Current Mailing Address:**

1000 WEST RAWSON AVENUE  
OAK CREEK, WI 53154

**New Mailing Address:**

9135 ELLIS RD  
WEST MELBOURNE, FL 32904

**FEI Number:** 39-1960462

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CASTLINE, JOHN  
9135 ELLIS RD  
MELBOURNE, FL 32904 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/MEMBERS:**

Title: MGRM ( ) Delete  
Name: EDER, EUGENE J  
Address: 1000 WEST RAWSON AVENUE  
City-St-Zip: OAK CREEK, WI 53154

Title: MGRM ( ) Delete  
Name: EVANS, THOMAS  
Address: 1000 WEST RAWSON AVENUE  
City-St-Zip: OAK CREEK, WI 53154

**ADDITIONS/CHANGES:**

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 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 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: JOHN CASTLINE

R/A

08/17/2004

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