

LIMITED LIABILITY COMPANY ANNUAL REPORT

10/2017 NAME OF LIMITED LIABILITY COMPANY:		ON LLC	
SECRETARY OF STATE ID NUMBER: 0997611 STATE C		OF FORMATION: NC	Filing Office Use Only E - Filed Annual Report 0997611 CA202012201981
REPORT FOR THE CALENDAR YEAR: 2	020		5/1/2020 01:45
SECTION A: REGISTERED AGENT'S INFO	RMATION		Changes
1. NAME OF REGISTERED AGENT:	Grady III, Arey W.		
2. SIGNATURE OF THE NEW REGISTE		NATURE CONSTITUTES CONSENT	TO THE APPOINTMENT
3. REGISTERED AGENT OFFICE STRE	EET ADDRESS & COUNTY	4. REGISTERED AGENT O	DFFICE MAILING ADDRESS
416 Pollock St		416 Pollock St	
New Bern, NC 28560-4947 Craven County		New Bern, NC 28560-4947	
1. DESCRIPTION OF NATURE OF BUS			
2. PRINCIPAL OFFICE PHONE NUMBER: (252) 670-2430		3. PRINCIPAL OFFICE EMAIL: Privacy Redaction	
4. PRINCIPAL OFFICE STREET ADDRESS		5. PRINCIPAL OFFICE MA	
5003 Morton Road		5003 Morton Road	
		-	
New Bern, NC 28562		New Bern, NC 28562	
6. Select one of the following if app The company is a veteran		nstructions)	
The company is a service-	-disabled veteran-owned	small business	
SECTION C: <u>COMPANY OFFICIALS</u> (Enter	additional company officials	in Section E.)	
NAME: Patrick O. McCullough	NAME:	NAN	/E:
TITLE: Manager	TITLE:	TITL	E:
ADDRESS:	ADDRESS:	ADD	PRESS:
4315 Country Club Rd			
New Bern, NC 28562			
SECTION D: CERTIFICATION OF ANNUA	AL REPORT. Section D mus	st be completed in its entirety	by a person/business entity.
Patrick O. McCullough		5/1/2020	
SIGNATURE Form must be signed by a Company Official listed ur	nder Section C of This form.		DATE

Print or Type Name of Company Official

Patrick O. McCullough

Print or Type Title of Company Official

Manager