



State of Rhode Island and Providence Plantations  
Office of the Secretary of State

Fee: \$50.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Limited Liability Company  
Annual Report**

Filing Period: September 1 - November 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

**ANNUAL REPORT YEAR:** 2011

**1. ID No.** 000536442

**2. Exact Name of the Limited Liability Company** Apex Tool Group, LLC

**3. State of Formation**

State: DE

**4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island**

ANY LAWFUL BUSINESS

**5. Principal Office Address**

No. and Street: 14600 YORK ROAD, SUITE A

City or Town: SPARKS State: MD Zip: 21152 Country: USA

**6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:**

Contact Name: MICHAEL J MUNN Contact Title: VP & GENERAL COUNSEL

No. and Street: 1000 LUFKIN ROAD

City or Town: APEX State: NC Zip: 27539 Country: USA

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.  
DO NOT LIST MEMBERS**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
MANAGER	STEVEN L BREITZKA	14600 YORK ROAD, SUITE A SPARKS, MD 21152 USA
MANAGER	DAVID K WELLS	14600 YORK ROAD, SUITE A SPARKS, MD 21152 USA
MANAGER	JOHN P CONSTANTINE	14600 YORK ROAD, SUITE A SPARKS, MD 21152 USA
MANAGER	MICHAEL J MUNN	1000 LUFKIN ROAD APEX, NC 27539 USA

**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER**  
**Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

CT CORPORATION SYSTEM 10 WEYBOSSET STREET PROVIDENCE , RI 02903

**9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).**

**Signed this 14 Day of September, 2011 at 3:37:16 PM by the authorized person.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By MICHAEL J MUNN  
Signature of Authorized Person

Form No. 632  
Revised 09/07