

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000003438

FILED
Jan 16, 2007
Secretary of State

Entity Name: A TRUCK LINE, LLC

Current Principal Place of Business:

2 GUERDON ROAD
LAKE CITY, FL 32055

New Principal Place of Business:

Current Mailing Address:

PO BOX 1829
LAKE CITY, FL 32056

New Mailing Address:

FEI Number: 59-3700850

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCRAE & METCALF, P.A.
1677 MAHAN CENTER BOULEVARD
TALLAHASSEE, FL 32308 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: ANDERSON, JOEY
Address: 871 NW GUERDON ST
City-St-Zip: LAKE CITY, FL 32055

Title: MGRM () Delete
Name: ANDERSON, DOUG
Address: 871 GUERDON ROAD
City-St-Zip: LAKE CITY, FL 32055

Title: MGRM () Delete
Name: SCHREIBER, BRIAN
Address: 871 GUERDON ROAD
City-St-Zip: LAKE CITY, FL 32055

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: JODI V. PULS

AR

01/16/2007

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