

2002-2003

1062

LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000003438



FILED

2003 APR -2 PM 12: 25

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

A-Truckline, LLC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

#2 Guerdon Rd.

3. Mailing Address

P.O. Box 1829

DO NOT WRITE IN THIS SPACE

City & State

Lake City, FL

City & State

Lake City, FL

4. FEI Number

59-3700850

Applied For

Not Applicable

Zip

32055

Country

USA

Zip

32056

Country

USA

5. Certificate of Status Desired

Not Applicable

\$5.00 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

M CRAE E METCALF, P.A.

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

1677 MAHAN CENTER BLVD.

City

TALLAHASSEE

FL

Zip Code

32308

DO NOT WRITE IN THIS SPACE

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

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

DATE

FEE IS \$50.00

Make Check Payable to Florida Department of State

DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM President
NAME Joey Anderson
STREET ADDRESS #2 Guerdon Rd - PO Box 1829
CITY-ST-ZIP Lake City, FL 32056

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MGRM Vice President
NAME Doug Anderson
STREET ADDRESS #2 Guerdon Rd - PO Box 1829
CITY-ST-ZIP Lake City, FL 32056

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MGRM Treasurer
NAME Brian Schreiber
STREET ADDRESS #2 Guerdon Rd - PO Box 1829
CITY-ST-ZIP Lake City, FL 32056

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MGRM Secretary
NAME Denise Broom
STREET ADDRESS #2 Guerdon Rd - PO Box 1829
CITY-ST-ZIP Lake City, FL 32056

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

700015047557
04/02/03--01004--013 \*\*100.00

DO NOT WRITE IN THIS SPACE

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: Denise W. Broom

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

3-24-03

Date

386 752

7585

Daytime Phone #

CR2E083B (12/02)

292

FILED

2003 APR -2 PM 12: 25

DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

March 24, 2003

A Truckline, LLC  
Post Office Box 1829  
Lake City, Florida 32056

Division of Corporations  
Post office Box 6478  
Tallahassee, Florida-32314

---

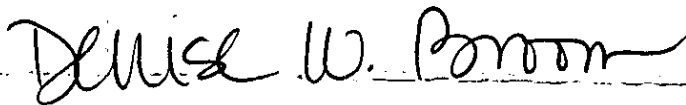
Re: Limited Liability Company  
Filing Fee

To Whom It May Concern:

I did not receive the 2002 business report to keep A Truckline an active limited liability company. This may be because the Division of Corporations has our physical address listed as the mailing address and the report was not received. I have completed a new uniform business report, and please note the correct mailing address. I was advised by a representative the renewal fee would be waived because of the mishap.

If you have any questions, or need additional information, you may reach me at (386) 752-7585, extension 235.

Thank you,



Denise W. Broom  
Secretary

Enclosure