

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 03, 2008 08:00 A
Secretary of State

DOCUMENT # L05000080579

1. Entity Name
WEBER SOUTH EQUIPMENT LEASING, LLC



Principal Place of Business
**40800 COOK BROWN ROAD
PUNTA GORDA, FL 33982**

Mailing Address
**40800 COOK BROWN ROAD
PUNTA GORDA, FL 33982**



02152008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-3346083

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**WEBER, SCOTT
40800 COOK BROWN ROAD
PUNTA GORDA, FL 33982**

**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.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	WEBER, GREGG
STREET ADDRESS	4242 FISH LAKE RD
CITY-ST-ZIP	NORTH BRANCH, MI 48461
TITLE	MGRM
NAME	WEBER, SCOTT
STREET ADDRESS	9214 PALM ISLAND CIRCLE
CITY-ST-ZIP	NORTH FORT MEYERS, FL 33903
TITLE	MGRM
NAME	WEBER, GERALDINE A
STREET ADDRESS	1401 E SILVERBELL RD
CITY-ST-ZIP	ORION, MI 48360
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *Scott R. Weber*

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

Date

Daytime Phone #

2/27/08 *239-5437240*