

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000001164

FILED
Apr 27, 2009
Secretary of State

Entity Name: GRA-GAR, LLC

Current Principal Place of Business:

14507 FRONTIER RD
OMAHA, NE 68138

New Principal Place of Business:

Current Mailing Address:

14507 FRONTIER RD
OMAHA, NE 68138

New Mailing Address:

FEI Number: 47-0615913 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE, SUITE 4
WESTON, FL 33331 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: MGR () Delete
Name: WERNER, GARY L
Address: 14507 FRONTIER ROAD
City-St-Zip: OMAHA, NE 68138

Title: MGR () Delete
Name: WERNER, GARY L
Address: 14507 FRONTIER RD
City-St-Zip: OMAHA, NE 68138

Title: MGR () Delete
Name: SYNOWICKI, ROBERT E JR
Address: 14507 FRONTIER RD
City-St-Zip: OMAHA, NE 68138

Title: MGR () Delete
Name: WERNER, GREGORY L
Address: 14507 FRONTIER ROAD
City-St-Zip: OMAHA, NE 68138

Title: MGR () Delete
Name: SYNOWICKI, ROBERT E JR
Address: 14507 FRONTIER ROAD
City-St-Zip: OMAHA, NE 68138

Title: S () Delete
Name: JOHNSON, JAMES L
Address: 14507 FRONTIER RD
City-St-Zip: OMAHA, NE 68138

ADDITIONS/CHANGES:

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

Title: T (X) Change () Addition
Name: STEELE, JOHN J
Address: 14507 FRONTIER RD
City-St-Zip: OMAHA, NE 68138

Title: MGRV (X) Change () Addition
Name: SYNOWICKI, ROBERT E JR
Address: 14507 FRONTIER RD
City-St-Zip: OMAHA, NE 68138

Title: MGRP (X) Change () Addition
Name: WERNER, GREGORY L
Address: 14507 FRONTIER ROAD
City-St-Zip: OMAHA, NE 68138

Title: V (X) Change () Addition
Name: REED, SCOTT
Address: 14507 FRONTIER ROAD
City-St-Zip: OMAHA, NE 68138

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

I hereby certify that the information supplied with this filing does not qualify 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: JOHN J STEELE

T

04/27/2009

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