

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000145372

FILED
Jan 13, 2015
Secretary of State
CC0315185861

Entity Name: POWER RENTAL ASSET CO LLC

Current Principal Place of Business:

3600 PORT JACKSONVILLE PARKWAY
JACKSONVILLE, FL 32226

Current Mailing Address:

3600 PORT JACKSONVILLE PARKWAY
JACKSONVILLE, FL 32226

FEI Number: 46-3942134

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

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: JILL CILMI, ASSISTANT CIVE PRESIDENT

01/13/2015

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	DIRECTOR, CFO	Title	SECRETARY
Name	MUNRO, LEE	Name	LIST, STEVEN
Address	3600 PORT JACKSONVILLE PARKWAY	Address	3600 PORT JACKSONVILLE PARKWAY
City-State-Zip:	JACKSONVILLE FL 32226	City-State-Zip:	JACKSONVILLE FL 32226
Title	TREASURER	Title	AUTHORIZED MEMBER
Name	SEE, BENJAMIN	Name	APR ENERGY HOLDINGS LIMITED
Address	3600 PORT JACKSONVILLE PARKWAY	Address	3600 PORT JACKSONVILLE PARKWAY
City-State-Zip:	JACKSONVILLE FL 32226	City-State-Zip:	JACKSONVILLE FL 32226
Title	DIRECTOR, CEO	Title	DIRECTOR, COO
Name	ANDERSON, GREGORY LAURENCE	Name	RICH, BRIAN A.
Address	3600 PORT JACKSONVILLE PARKWAY	Address	3600 PORT JACKSONVILLE PARKWAY
City-State-Zip:	JACKSONVILLE FL 32226	City-State-Zip:	JACKSONVILLE FL 32226
Title	ASST. TREASURER	Title	ASST. SECRETARY
Name	KIBLER, ELISABETH	Name	BEAN, WESLEY
Address	3600 PORT JACKSONVILLE PARKWAY	Address	3600 PORT JACKSONVILLE PARKWAY
City-State-Zip:	JACKSONVILLE FL 32226	City-State-Zip:	JACKSONVILLE FL 32226

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: STEVE LIST

SECRETARY

01/13/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date