## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L00000004752

City-St-Zip:

MADISON, FL 32340

Entity Name: COATES EQUIPMENT, LLC

FILED Jun 21, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 610 SW SAMPALA LK RD MADISON, FL 32340 **Current Mailing Address: New Mailing Address:** 610 SW SAMPALA LK RD MADISON, FL 32340 FEI Number: 59-3213645 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: COATES, SCOTT D 610 SW ŚAMPALA LAKE RD MADISON, FL 32340 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: OWNR Title: () Change () Addition () Delete COATES, SCOTT Name: Name: Address: 17075 S.E. 95TH ST. RD. Address: City-St-Zip: OCKLAWAHA, FL 32179 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: TRAINO, CAROLYN Name: Address: 17075 SE 95TH ST RD Address: City-St-Zip: OCKLAWAHA, FL 32179 City-St-Zip: Title: MGR () Delete Title: () Change () Addition COATES, CAROLYN Name: Name: 610 SW CAMPALA LK RD Address: Address:

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.

City-St-Zip:

SIGNATURE: SCOTT COATES OWNE 06/21/2009