


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90047 019 ****50.00

DOCUMENT # L00000010842 1. Entity Name A-1 TRAILERS, L.L.C.	
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Principal Place of Business 12512 LAKESHORE DR. CLERMONT, FL 34711	Mailing Address 12512 LAKESHORE DR. CLERMONT, FL 34711
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DO NOT WRITE IN THIS SPACE



04212006No Chg-LLC

CR2E083 (11/05)

4. FEI Number 65-1117704	Applied for <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent RUSS, CHARLES R 12512 S. LAKESHORE DR. CLERMONT, FL 34711-8844

**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

**Filing Fee is \$50.00
Due by May 1, 2006**

8. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR RUSS, CHARLES R 12512 S. LAKESHORE DR. CLERMONT, FL 34711
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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: *Dianne Russ* 4/21/06 352-394-0399
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #