## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L02000007962

Entity Name: REKAT RENTALS, LLC

FILED Jan 12, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

10100 S. US #1

PORT ST. LUCIE, FL 34952

**Current Mailing Address: New Mailing Address:** 

10100 S. US #1

PORT ST. LUCIE, FL 34952

FEI Number: 01-0651997 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

STAKER, CHRISTOPHER A 10100 S. US #1

PORT ST. LUCIE, FL 34952 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:

Date

Electronic Signature of Registered Agent

## MANAGING MEMBERS/MANAGERS:

MGRM () Delete WILLIAMS, CHRISTINE W Name: Address: 10100 S. FEDERAL HWY. City-St-Zip: PORT ST. LUCIE, FL

Title: MGRM ( ) Delete STAKER, CHRISTOPHER A Name: Address: 10100 S. FEDERAL HWY City-St-Zip: PORT ST. LUCIE, FL

## ADDITIONS/CHANGES:

Title: (X) Change ( ) Addition WILLIAMS, CHRISTINE L Name: Address: 10100 S. FEDERAL HWY City-St-Zip: PORT ST. LUCIE, FL 34952

Title: MGRM (X) Change ( ) Addition Name: STAKER, CHRISTOPHER A Address: 10100 S. FEDERAL HWY City-St-Zip: PORT ST. LUCIE, FL 34952

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: CHRISTINE L WILLIAMS **MGRM** 01/12/2008