## 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

## **FILED** Mar 18, 2003 8:00 am Secretary of State

DOCUMENT # LO2000010822 t. Entity Name KELLER TRANSPORTATION, L.L.C.					02-21-2	2003 90018 022 *	****50.00	
Principal Place of Business 206 COURTLAND CIRCLE LAKELAND FL 33803		Mailing Address 206 COURTLAND CIRCLE LAKELAND FL 33803						
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES			
City & State		City & State		4. FEI 1	√umber -17 <b>6</b> 2360	<del></del>	Applied For Not Applicab	
Zip	Country	Zip	Country	,	ficate of Status Desired	¢E AA	dditional	
	6. Name and Address of Current Re	iglstered Agent "		~7 Nam	and Address of New	Registered Agent.		7
KEI	LER, GERALD L		Nam	e -		<u> </u>		_]_
208	COURTLAND CIRCLE (ELAND FL 33803		Stree	Street Address (P.O. Box Number is Not Acceptable)				
			City	······		FL Zip Co	ode	_
8. The above the obligat	e named entity submits this statement for the tions of registered agent.	ne purpose of changing its	registered office	or registered agent,	or both, in the State of F		n, and accept	=
ę	Signature, typed or printed name of registered agent and	tite if applicable. (NOTE	Registered Agent sig	nature required when reinstate	<b>19</b> )	DATE		_]
		FILE NO	W!!! FEE IS	\$50.00				7
;		Make Check Payable Due	e to Florida C By May 1, 20	•	6			
· 9.	4 MANAGING MEMBERS	/MANAGERS	10.		ADDITIONS	/CHANGES		-
TITLE	MANAGER	☐ Delets	TITLE	T		☐ Change	Addition	ក្ត
NAME	GERALD L. KELLER		NAME			•		β
STREET ADDRESS	206 COURTLAND CIRCLE		STREET ADORES	s				g
CITY-ST-ZIP	LAKELAND, FL 33803		CITY-SI-ZIP					_  <u>iii</u>
TITLE	MEMBER	Delete	TITLE			☐ Change	☐ Addition	CR2E083 (10/02)
NAME	G & J INVESTMENTS, INC.							10
STREET ADDRESS : CITY-ST-ZIP	0710 MODULET FIRE, 3011E 122			s				
	CINCINNATI, OHIO 45	227	CITY-ST-ZIP		<u> </u>			_   .
TITLE NAME		Delete	TIPLE			☐ Change	Addition	1
STREET ADDRESS		<del></del>	NAME STREET ADDRESS			<u></u>		_
CITY-ST-ZIP		- 10 - 4 - 4 - 10 - 10 - 10 - 10 - 10 -	CITY-ST-ZIP			<u> </u>		
TITLE		Defete	TITLE		•	Change	☐ Addition	1
NAME STREET ADORESS			NAME CERTE ADDRESS	. <b>}</b>				1
CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP	'				1
TITLE		☐ Delete	TITLE	<del> </del>	·			4
NAME		LJ Derette	NAME			☐ Change	☐ Addition	1
STREET ADDRESS			STREET ADDRESS					[
CITY-ST-ZIP			CITY-ST-ZIP					
TITLE		☐ Delete	TITLE			☐ Change	Addition	1 '
NAME			NAME	1				1
STREET ADDRESS			STREET ADDRESS		•			1
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	<u> </u>	CITY-ST-ZIP					l

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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.

513-271-0163