


# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Mar 29, 2007 8:00 am**  
**Secretary of State**

03-29-2007 90177 002 \*\*\*\*50.00

<b>DOCUMENT # L02000032555</b> 1. Entity Name <b>CARBON EQUIPMENT COMPANY, LLC</b>					
Principal Place of Business <b>1401 MANATEE AVE. W, STE. 910 BRADENTON, FL 34205</b>			Mailing Address <b>1401 MANATEE AVE. W, STE. 910 BRADENTON, FL 34205</b>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address <i>same</i>			
Suite, Apt. #, etc. <i>11023 Gatewood Dr. # 103</i>		Suite, Apt. #, etc. <i>same</i>			
City & State <i>Bradenton, FL 34211</i>		City & State <i>same</i>			
Zip <i>34211</i>	Country <i>USA</i>	Zip <i>same</i>	Country <i>USA</i>	4. FEI Number <b>06-1675223</b>	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$5.00 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>MURRELL, FREDERICK J 1401 MANATEE AVE. W, STE. 910 BRADENTON, FL 34205</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) <i>11023 Gatewood Drive # 103</i> City <i>Bradenton</i>		
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 _____ DATE <i>3-21-2007</i> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>Filing Fee is \$50.00 Due by May 1, 2007</b>		<b>Make check payable to Florida Department of State</b>			
<b>9. MANAGING MEMBERS/MANAGERS</b>			<b>10. ADDITIONS/CHANGES</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MURRELL, FREDERICK J 1401 MANATEE AVE. W, SUITE 910 BRADENTON, FL 34205	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MURRELL, FREDERICK J 1401 MANATEE AVE. W, SUITE 910 BRADENTON, FL 34205	<input type="checkbox"/> Delete			
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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: <i>F.J. Murrell, Pres.</i> <i>3-21-07</i> <i>941-747-2636</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>					