2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# L03000011859

Entity Name: PICKET FENCE RENTALS, LLC

Current Principal Place of Business:

1193 HARVEST RIDGE
MARIANNA, FL 32448

New Principal Place of Business:

1188 HARVEST RIDGE
MARIANNA, FL 32448

Current Mailing Address:

1193 HARVEST RIDGE
MARIANNA, FL 32448

New Mailing Address:

1188 HARVEST RIDGE
MARIANNA, FL 32448

FEI Number: 75-3110792 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DURAND, CAMILLA
1193 HARVEST RIDGE
MARIANNA, FL 32448 US

Name and Address of New Registered Agent:

DURAND, CAMILLA
1188 HARVEST RIDGE
MARIANNA, FL 32448 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: _____ 04/30/2009
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: DURAND, CAMILLA R
Address: 1193 HARVEST RIDGE
City-St-Zip: MARIANNA, FL 32448

Title: MGRM ( ) Delete
Name: DURAND, LILIA D
Address: 1193 HARVEST RIDGE
City-St-Zip: MARIANNA, FL 32448

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: DURAND, CAMILLA R
Address: 1188 HARVEST RIDGE
City-St-Zip: MARIANNA, FL 32448

Title: MGRM (X) Change ( ) Addition
Name: DURAND, LILIA D
Address: 1188 HARVEST RIDGE
City-St-Zip: MARIANNA, FL 32448

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: CAMILLA DURAND MGRM 04/30/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date