2008 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR) - DUE BY MAY 1, 2008

FILED
Mar 31, 2008 8:00 am
Secretary of State
03-31-2008 90264 031 ***143.75

DOCUMENT # L03000046184

1. Entity Name

DALTON E. LEIGHTON WELL DRILLING PUMP SALES & SERVICE, LLC

Principal Place of Business	Mailing Address
1307 S. EVERS ST. PLANT CITY FL 33563 US	1307 S. EVERS ST. PLANT CITY FL 33563 US

1st MOORE CR2E083 (10/07)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
LEIGHTON, STEPHANIE L 1307 S. EVERS ST. PLANT CITY FL 33563	Name: Dalton E. Leighton Street Address (P.O. Box Number is Not Acceptable): 1307 S. Evers St. Plant City City: FL Zip Code: 33563

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: Dalton E. Leighton DALTON E. LEIGHTON 2/3/08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $138.75
After May 1, 2008, Fee Will Be $538.75
Make Check Payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LEIGHTON, STEPHANIE L 1307 SOUTH EVERS ST. PLANT CITY FL 33563	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	owner/Mgr. Dalton E. Leighton 1307 S. Evers St. Plant City, FL 33563	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Dalton E. Leighton Dalton E. Leighton 813-754-4074
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #