

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000007803

FILED
Aug 10, 2006
Secretary of State

Entity Name: LTS CUSTOM TRANSPORTATION, LLC

Current Principal Place of Business:

1765 N.W. 60 AVE
OCALA, FL 34482

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 772273
OCALA, FL 34477

New Mailing Address:

FEI Number: 06-1719779 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SAUNDERS, SUZANNE S
14 NEEDLES DR.
OCALA, FL 34482 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SAUNDERS, JOHN R
Address: P.O. BOX 772273
City-St-Zip: Ocala, FL 34477 MA

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: ASST () Change (X) Addition
Name: LEE, TOBIN A ASST. M
Address: 1533 S.E. 8TH ST.
City-St-Zip: Ocala, FL 34471

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN R. SAUNDERS

MGR

08/10/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date