

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**DOCUMENT # L04000053600**

1. Entity Name  
**UNITED TRAILER SALES, LLC**



Principal Place of Business  
4200 WEST HIGHWAY 40  
OCALA, FL 34482

Mailing Address  
4200 WEST HIGHWAY 40  
OCALA, FL 34482

**FILED**  
**Mar 22, 2006 08:00 AM**  
**Secretary of State**



02272006No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**NOT APPLICABLE**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**WILLIAM D SOMAN P A**  
3471 MAIN HIGHWAY, #622  
MIAMI, FL 33133

**DO NOT WRITE  
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00**  
**Due by May 1, 2006**

1100000477528  
04/06/06-80054-022 50.00

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
**MGRM**  
**WILKERSON, NANCY**  
**4200 SE ST HWY 40**  
**CRYSTAL RIVER, FL 34428**

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE  
NAME  
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CITY- ST- ZIP

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IN THIS SPACE**

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:**

*Nancy Wilkerson*

*3-20-06*  
DATE

*352-804-8011*  
DAYTIME PHONE \*