

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000063746

Entity Name: M & E TRUCKING LLC

FILED  
Sep 01, 2008  
Secretary of State

## Current Principal Place of Business:

304 DURHAM AVE.  
LAKE PLACID, FL 33852

## New Principal Place of Business:

8064 SR 64 E  
ZOLFO SPRINGS, FL 33890

## Current Mailing Address:

304 DURHAM AVE.  
LAKE PLACID, FL 33852

## New Mailing Address:

8064 SR 64 E  
ZOLFO SPRINGS, FL 33890

FEI Number: 77-0645156      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:

AGENTS AND CORPORATIONS, INC.  
300 FIFTH AVENUE SOUTH  
SUITE 101-330  
NAPLES, FL 34102 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: WILSON, MARIO A MGR  
Address: 304 DURHAM AVE  
City-St-Zip: LAKE PLACID, FL 33852 US

Title: MGRM ( ) Delete  
Name: WILSON, ELAINE MGRM  
Address: 304 DURHAM AVE.  
City-St-Zip: LAKE PLACID, FL 33852 US

Title: MGRM ( ) Delete  
Name: WILSON, SHIRLEY MGRM  
Address: 304 DURHAM AVE.  
City-St-Zip: LAKE PLACID, FL 33852 US

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: WILSON, MARIO A MGR  
Address: 8064 SR 64 E  
City-St-Zip: ZOLFO SPRINGS, FL 33890 US

Title: MGRM (X) Change ( ) Addition  
Name: WILSON, SHIRLEY E. MGRM  
Address: 8064 SR 64 E  
City-St-Zip: ZOLFO SPRINGS, FL 33890 US

Title: MGRM (X) Change ( ) Addition  
Name: WILSON, CALVIN L. MGRM  
Address: 8064 SR 64 E.  
City-St-Zip: ZOLFO SPRINGS, FL 33890 US

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: SHIRLEY E. WILSON

MGRM

09/01/2008

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