

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000065249

FILED
Jul 06, 2005
Secretary of State

Entity Name: ANIMAL CONTAINER LEASING LLC

Current Principal Place of Business:

558 GOLDEN WOODS WAY
WELLINGTON, FL 33414 US

New Principal Place of Business:

558 GOLDEN WOOD WAY
WELLINGTON, FL 33414 US

Current Mailing Address:

558 GOLDEN WOODS WAY
WELLINGTON, FL 33414 US

New Mailing Address:

558 GOLDEN WOOD WAY
WELLINGTON, FL 33414 US

FEI Number: 37-1497332 **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:

COLEMAN, JAMES KEVIN
558 GOLDEN WOODS WAY
WELLINGTON, FL 33414 US

Name and Address of New Registered Agent:

COLEMAN, JAMES KEVIN
558 GOLDEN WOOD WAY
WELLINGTON, FL 33414 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:

07/06/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: COLEMAN, JAMES KEVIN
Address: 558 GOLDEN WOODS WAY
City-St-Zip: WELLINGTON, FL 33414 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: COLEMAN, JAMES KEVIN
Address: 558 GOLDEN WOOD WAY
City-St-Zip: WELLINGTON, FL 33414 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JAMES K COLEMAN

MR.

07/06/2005

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