

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000093104

**FILED**  
**Apr 14, 2010**  
**Secretary of State**

**Entity Name:** CAPITAL EQUIPMENT RESOURCE, LLC

**Current Principal Place of Business:**

17505 SE INDIAN HILLS DR  
TEQUESTA, FL 33469

**New Principal Place of Business:**

**Current Mailing Address:**

17505 SE INDIAN HILLS DR  
TEQUESTA, FL 33469

**New Mailing Address:**

**FEI Number:** 20-2046626

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MCRBERTS, MATTHEW T  
17505 SE INDIAN HILLS DRIVE  
TEQUESTA, FL 33469 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: P  
Name: MCRBERTS, MATTHEW T  
Address: 17505 SE INDIAN HILLS DRIVE  
City-St-Zip: TEQUESTA, FL 33469

Title: ST  
Name: MCRBERTS, VALERIE J  
Address: 17505 SE INDIAN HILLS DRIVE  
City-St-Zip: TEQUESTA, FL 33469

I hereby 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: VALERIE MCRBERTS

ST

04/14/2010

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