2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000027306

Entity Name: ELT RENTALS, LLC

Address:

City-St-Zip:

421 KEENE WAY DRIVE

NICHOLASVILLE, KY 40356

FILED Jan 18, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 10509 FRONT BEACH RD, TOWER I, UNIT 400 PANAMA CITY, FL 32417 **Current Mailing Address: New Mailing Address:** 2495 WILMORE ROAD NICHOLASVILLE, KY 40356 FEI Number: 51-0006522 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: ADDITIONS/CHANGES: Title: () Change () Addition () Delete TREADWAY, MONNA Name: Name: Address: 2495 WILMORE ROAD Address: City-St-Zip: NICHOLASVILLE, KY 40356 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: TINCHER, KATHY ANN Name: Address: 1076 CEDAR RIDGE LANE Address: City-St-Zip: VERSAILLES, KY 40383 City-St-Zip: Title: MGR () Delete Title: () Change () Addition THORE, TIMOTHY WAYNE Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: MONNA R. TREADWAY MGR 01/18/2008