2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# L05000036473

Entity Name: TRUE LUBE EXPRESS, LLC

Current Principal Place of Business:

4100 CRILL AVENUE
PALATKA, FL 32177

New Principal Place of Business:

Current Mailing Address:

546 COUNTY ROAD 207A
EAST PALATKA, FL 32131

New Mailing Address:

FEI Number: 57-1219969 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MOTES, CARL D
1072 LAKE BALDWIN LANE
ORLANDO, FL 32814 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: KANE, ELLIOTT
Address: 546 COUNTY ROAD 207A
City-St-Zip: EAST PALATKA, FL 32131

Title: MGRM ( ) Delete
Name: WILKINSON, LEOLA D
Address: 627 BARDIN ROAD
City-St-Zip: PALATKA, FL 32177

Title: MGRM ( ) Delete
Name: WILKINSON, EUGENE R
Address: 627 BARDIN ROAD
City-St-Zip: PALATKA, FL 32177

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: EUGENE R. WILKINSON MGRM 04/28/2009

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