

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 13, 2008 08:00 AM
Secretary of State

DOCUMENT # L05000036486 1. Entity Name A-1-TRACTOR"L.C."	
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Principal Place of Business 613169 RIVER RD. CALLAHAN, FL 32011	Mailing Address 613169 RIVER RD. CALLAHAN, FL 32011
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DO NOT WRITE IN THIS SPACE



02082008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 33-1115983	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

EDDY, JOSEPH C
613169 RIVER RD.
CALLAHAN, FL 32011

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR EDDY, JOSEPH C 613169 RIVER RD. CALLAHAN, FL 32011
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM EDDY, BRIAN D 613169 RIVER RD. CALLAHAN, FL 32011
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02/21/08-80048-025-138.75

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Joseph C. Eddy 2-11-08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #