2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

FILED
Jan 17, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000093299

1. Entity Name
AT EQUIPMENT LEASING LLC



Principal Place of Business

308 EAST FIFTH AVENUE MOUNT DORA, FL 32757

Mailing Address

308 EAST FIFTH AVENUE MOUNT DORA, FL 32757



01042007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number Applied For 20-3711930 Not Applied For Not Applicable

5. Certificate of Status Desired Status Desired Fee Required

6. Name and Address of Current Registered Agent

CLEMENT, G. EDWARD 308 EAST FIFTH AVENUE MOUNT DORA, FL 32757 DO NOT WRITE

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
1	the obligations of registered agent.	

SIGNATURE.

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$50.00 Due by May 1, 2007 000000589016 01/17/07-80096-003 50.00

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR POTTER, DEL G 308 EAST FIFTH AVENUE MOUNT DORA, FL 32757
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CLEMENT, G. EDWARD 308 EAST FIFTH AVENUE MOUNT DORA, FL 32757
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
11. I hereby of indicated	certify that the information supplied with this filing does not qualify for the ex-

DO NOT WRITE
IN THIS SPACE

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:

JRE: ESW COLOR
BIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1/10/7 352.383.418

Date