2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

Secretary of State 03-27-2007 90204 010 ****50.00 DOCUMENT # L05000099098 1. Entity Name E F RENTALS LLC Mailing Address Principal Place of Business 60029791 2210 SOUTH ELORIDA AVE LAKELAND, FL 33803 US 742 ROYAL GLEN DRIVE LAKELAND, FL 33813 US CR2E083 (11/05) 01082007 No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-3598782 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FIELD, ELAINE M DO NOT WRITE 742 ROYAL GLEN DRIVE LAKELAND, FL 33813 IN THIS SPACE 8. The above namedientity 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 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 MANAGING MEMBERS/MANAGERS 9. MGR TITLE NAME FIELD, ELAINE M STREET ADDRESS 742 ROYAL GLEN DRIVE LAKELAND, FL 33813 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP

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.

Date

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

FILED Mar 27, 2007 8:00 am