2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 11, 2008
Secretary of State

DOCUMENT# L05000108816

Entity Name: TRUEMAN, LLC

Current Principal Place of Business:

2600 OVERLOOK DRIVE
WINTER HAVEN, FL

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 747
WINTER HAVEN, FL 33882

New Mailing Address:

FEI Number: 51-0559351 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CLINE, DEBRA L
141 5TH STREET
WINTER HAVEN, FL 33883 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: BENTLEY, PATRICK T MGR
Address: 2600 OVERLOOK DRIVE
City-St-Zip: WINTER HAVEN, FL 33884 US

Title: MGR ( ) Delete
Name: STALLINGS, JAMES L MGR
Address: 200 N FLORIDA AVE
City-St-Zip: WAUCHULA, FL 33873 US

Title: MGR ( ) Delete
Name: SMITH III, CHARLES C MGR
Address: P O BOX 235
City-St-Zip: EAGLE LAKE, FL 33839 US

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: PATRICK T BENTLEY MGR 04/11/2008

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