

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 12, 2007 08:00 AM
Secretary of State

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| DOCUMENT # L05000111820 1. Entity Name NIAGARA EQUIPMENT COMPANY LLC |  |
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|---|---|
| Principal Place of Business 1447 STEWART BOULEVARD CLEARWATER, FL 33764 | Mailing Address 1447 STEWART BOULEVARD CLEARWATER, FL 33764 |
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02052007No Chg-LLC

CR2E083 (11/05)

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| 4. FEI Number 20-4066178 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |

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| 6. Name and Address of Current Registered Agent MANCUSO, LINDA 1447 STEWART BOULEVARD CLEARWATER, FL 33764 |
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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 *Linda Mancuso* 2/9/07
(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**

| 9. MANAGING MEMBERS/MANAGERS | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR LOCHBAUM, HARRY S 1447 STEWART BOULEVARD CLEARWATER, FL 33764 |
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02/21/07-80001-012 50.00

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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: *Darryl S. Sedman* 2/9/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #