

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000115456

FILED  
May 24, 2006  
Secretary of State

Entity Name: EZ LOAD ENTERPRISES LLC

**Current Principal Place of Business:**

559 NORTHPORT DR  
LONGWOOD, FL 32750 US

**New Principal Place of Business:**

361 ANCHOR RD  
1009  
CASSELBERRY, FL 32707 US

**Current Mailing Address:**

559 NORTHPORT DR  
LONGWOOD, FL 32750 US

**New Mailing Address:**

FEI Number: 59-3681873      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

ORTHMANN, BRAD  
559 NORTHPORT DR  
LONGWOOD, FL 32750 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: ORTHMANN, BRAD  
Address: 559 NORTHPORT DR  
City-St-Zip: LONGWOOD, FL 32750 US

Title: MGR ( ) Delete  
Name: JACOBS, FLOYD  
Address: 590 LAKE KATHRYN CIRCLE  
City-St-Zip: CASSELBERRY, FL 32707 US

Title: MGR ( ) Delete  
Name: EARLE, STEPHEN  
Address: 590 LAKE KATHRYN CIRCLE  
City-St-Zip: CASSELBERRY, FL 32707 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR (X) Change ( ) Addition  
Name: EARLE, STEPHEN  
Address: 608 W 20TH ST  
City-St-Zip: SANFORD, FL 32772 US

I hereby certify that the information supplied with this filing does not qualify for the 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: BRAD ORTHMANN

MGR

05/24/2006

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