

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED
Jul 08, 2008
Secretary of State**

DOCUMENT# L06000007026

Entity Name: MOBILE HORSE SUPPLY, LLC

Current Principal Place of Business:

2490 S. COUNTY ROAD 419
CHULUOTA, FL 32766

New Principal Place of Business:

Current Mailing Address:

2490 S. COUNTY ROAD 419
CHULUOTA, FL 32766

New Mailing Address:

FEI Number: 20-4153597 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:

MCCRACKEN, R. JO
2490 S. COUNTY ROAD 419
CHULUOTA, FL 32766 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: MGRM () Delete
Name: MCCRACKEN, R. JO
Address: 2490 S. COUNTY ROAD 419
City-St-Zip: CHULUOTA, FL 32766

ADDITIONS/CHANGES:

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: R. JO MCCRACKEN

OWNE

07/08/2008

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