

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000045510

FILED
Jan 14, 2008
Secretary of State

Entity Name: A-PASCO MOVING SYSTEMS, LLC

Current Principal Place of Business:

936 E. 124TH AVENUE
TAMPA, FL 33612 US

New Principal Place of Business:

15486 N. NEBRASKA AVE.
LUTZ, FL 33549 US

Current Mailing Address:

936 E. 124TH AVENUE
TAMPA, FL 33612 US

New Mailing Address:

15486 N. NEBRASKA AVE.
LUTZ, FL 33549 US

FEI Number: 20-4802708

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMAN LAW FIRM
14001 N. DALE MABRY HWY.
TAMPA, FL 33618 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: QUEENEY, DONALD H
Address: 3534 BUSINESS CENTER DRIVE
City-St-Zip: CHESAPEAKE, VA 23323 US

Title: MGRM () Delete
Name: QUEENEY, BRENDA K
Address: 3534 BUSINESS CENTER DRIVE
City-St-Zip: CHESAPEAKE, VA 23323 US

Title: MGRM () Delete
Name: INTERMODAL CREDIT CO, RPORTATION
Address: P.O. BOX 1302
City-St-Zip: EAST GREENWICH, RI 02818 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: BRENDA K. QUEENEY

VP

01/14/2008

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