

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000092961

FILED  
Mar 20, 2008  
Secretary of State

Entity Name: AMERICAN PORTABLES, LLC

## Current Principal Place of Business:

3002 NW 10TH STREET  
OCALA, FL 34475 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 4201  
OCALA, FL 34478 US

## New Mailing Address:

FEI Number: 20-5588335

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

POOLE, LESLI M  
82 PECAN COURSE LOOP  
OCALA, FL 34472 US

## Name and Address of New Registered Agent:

POOLE, LESLI M  
10335 NE HWY 314  
SILVER SPRINGS, FL 34488 US

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:

03/20/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: PD ( ) Delete  
Name: POOLE, LESLI M  
Address: 82 PECAN COURSE LOOP  
City-St-Zip: OCALA, FL 34472 US

Title: STD ( ) Delete  
Name: RUSSELL, CHRISTINA L  
Address: 8102 S.W. 95TH LANE  
City-St-Zip: GAINESVILLE, FL 32608 US

Title: VPD ( ) Delete  
Name: VALDERRAMA, OMAR T  
Address: 10890 S.E. 73RD COURT  
City-St-Zip: BELLEVUE, FL 34420 US

## ADDITIONS/CHANGES:

Title: PD (X) Change ( ) Addition  
Name: POOLE, LESLI M  
Address: 10335 NE HWY 314  
City-St-Zip: SILVER SPRINGS, FL 34488 US

Title: VPD (X) Change ( ) Addition  
Name: RUSSELL, CHRISTINA L  
Address: 8102 S.W. 95TH LANE  
City-St-Zip: GAINESVILLE, FL 32608 US

Title: STD (X) Change ( ) Addition  
Name: POOLE, LESLI M  
Address: 10335 NE HWY 314  
City-St-Zip: SILVER SPRINGS, FL 34488 US

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: LESLI POOLE

P

03/20/2008

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