

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L07000070044

1. Entity Name
STRAIGHT FORWARD TRANSPORTATION L.L.C.



Principal Place of Business
2241 MILL ROAD
COTTONDALE, FL 32431

Mailing Address
2241 MILL ROAD
COTTONDALE, FL 32431

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

— Suite/Apt. #, etc. —

Suite/Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01122008 Chg-LLC CR2E083 (12/06)

4. FEI Number

Applied For

☒ Not Applicable

5. Certificate of Status Desired

☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FORWARD, CHERYL R
2241 MILL ROAD
COTTONDALE, FL 32431

Name

— Street Address (P.O. Box Number is Not Acceptable) —

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and state if applicable.

(NOTE: Registered Agent signature required when substituting)

DATE

FILE NOW! - FEE IS \$138.75.
After May 1, 2008 Fee will be \$538.75

Make check payable to
Florida Department of State

9. MANAGING (MANAGING MEMBERS/MANAGERS)

10. ADDITIONS/CHANGES

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP
Cheryl Forward
2241 Mill Road
Cottondale, FL 32431

☐ Delete

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP
U00000916046
05/12/08-30012-020 139.75

☐ Change ☐ Addition

TITLE NAME
STREET ADDRESS
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☐ Delete

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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: Cheryl R Forward

SIGNATURE AND TYPED OR PRINTED NAME OF EXISTING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

4/22/08

Date

Daytime Phone #

FILED

08 JUL 18 PM 3:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

