

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000079399

FILED  
Apr 29, 2008  
Secretary of State

Entity Name: L4 TRUCKING, LLC

**Current Principal Place of Business:**

3191 WEST NINE MILE ROAD  
PENSACOLA, FL 32534

**New Principal Place of Business:**

**Current Mailing Address:**

3191 WEST NINE MILE ROAD  
PENSACOLA, FL 32534

**New Mailing Address:**

FEI Number: 41-2248088

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LAVALLEE, PAUL  
3191 WEST NINE MILE ROAD  
PENSACOLA, FL 32534 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: LAVALLE, PAUL R  
Address: 3191 WEST NINE MILE ROAD  
City-St-Zip: PENSACOLA, FL 32534

Title: MGRM ( ) Delete  
Name: LAVALLE, ROBERT W  
Address: 3191 WEST NINE MILE ROAD  
City-St-Zip: PENSACOLA, FL 32534

Title: MGRM ( ) Delete  
Name: LAVALLE, PAUL A  
Address: 3191 WEST NINE MILE ROAD  
City-St-Zip: PENSACOLA, FL 32534

Title: MGRM ( ) Delete  
Name: LAVALLE, BOBBY D  
Address: 3191 WEST NINE MILE ROAD  
City-St-Zip: PENSACOLA, FL 32534

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: LAVALLEE, PAUL R  
Address: 3191 WEST NINE MILE ROAD  
City-St-Zip: PENSACOLA, FL 32534

Title: MGRM (X) Change ( ) Addition  
Name: LAVALLEE, ROBERT W  
Address: 3191 WEST NINE MILE ROAD  
City-St-Zip: PENSACOLA, FL 32534

Title: MGRM (X) Change ( ) Addition  
Name: LAVALLEE, PAUL A  
Address: 3191 WEST NINE MILE ROAD  
City-St-Zip: PENSACOLA, FL 32534

Title: MGRM (X) Change ( ) Addition  
Name: LAVALLEE, BOBBY D  
Address: 3191 WEST NINE MILE ROAD  
City-St-Zip: PENSACOLA, FL 32534

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: BOBBY D LAVALLEE

MGRM

04/29/2008

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