

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000109979

FILED  
Mar 31, 2009  
Secretary of State

Entity Name: KBS LIFT TRUCK SERVICE, LLC

**Current Principal Place of Business:**

1974 BILTMORE ST., #204  
PORT ST. LUCIE, FL 34984

**New Principal Place of Business:**

1812 SW BILTMORE STREET  
PORT ST. LUCIE, FL 34984

**Current Mailing Address:**

1974 BILTMORE ST., #204  
PORT ST. LUCIE, FL 34984

**New Mailing Address:**

1812 SW BILTMORE STREET  
PORT ST. LUCIE, FL 34984

FEI Number: 26-1394283

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

GRASSETTE, JOANNE  
1765 SW CADIMA STREET  
PORT ST. LUCIE, FL 34987 US

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

GRASSETTE, JOANNE  
1066 SW CAIRO AVENUE  
PORT ST. LUCIE, FL 34953 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: \_\_\_\_\_

03/31/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: GRASSETTE, JOANNE  
Address: 1765 SW CADIMA STREET  
City-St-Zip: PORT ST. LUCIE, FL 34987

Title: MGRM ( ) Delete  
Name: HEDDEN, JOHN  
Address: 981 S W NORTH GLOBE AVE  
City-St-Zip: PORT ST. LUCIE, FL 34953

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: GRASSETTE, JOANNE  
Address: 1066 SW CAIRO AVENUE  
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: MGRM (X) Change ( ) Addition  
Name: HEDDEN, JOHN  
Address: 1066 SW CAIRO AVENUE  
City-St-Zip: PORT ST. LUCIE, FL 34953

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: JOANNE GRASSETTE

MGR

03/31/2009

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