

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000113484

Entity Name: PRIME TRUCKING, LLC

**FILED**  
**Apr 29, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

3090 ANQUILLA AVE  
CLERMONT, FL 34711

**New Principal Place of Business:**

**Current Mailing Address:**

3090 ANQUILLA AVE  
CLERMONT, FL 34711

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

LEWIS, KEVON  
3090 ANQUILLA AVENUE  
CLERMONT, FL 34711 US

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

CLINCY, PAMELA  
3090 ANQUILLA AVENUE  
CLERMONT, FL 34711 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: PAMEA CLINCY

04/29/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: CLINCY, PAMELA M  
Address: 3090 ANQUILLA AVE  
City-St-Zip: CLERMONT, FL 34711

Title: MGR  
Name: LEWIS, KEVON  
Address: 3090 ANQUILLA AVE  
City-St-Zip: CLERMONT, FL 34711

I hereby 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: PAMELA M, CLINCY

MGRM

04/29/2010

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