

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000013575

FILED  
Jan 08, 2009  
Secretary of State

Entity Name: ARBOR EQUIPMENT NATION,LLC

**Current Principal Place of Business:**

6158 PORTER RD  
SARASOTA, FL 34240

**New Principal Place of Business:**

6150 PORTER RD  
SARASOTA, FL 34240

**Current Mailing Address:**

6158 PORTER RD  
SARASOTA, FL 34240

**New Mailing Address:**

6150 PORTER RD  
SARASOTA, FL 34240

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

LEONARD, DEWANA M  
6158 PORTER RD  
SARASOTA, FL 34240 US

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

LEONARD, DEWANA M  
6150 PORTER RD  
SARASOTA, FL 34240 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: DEWANA M.LEONARD

01/08/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: LEONARD, DEWANA M  
Address: 6158 PORTER RD  
City-St-Zip: SARASOTA, FL 34240 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: LEONARD, DEWANA M  
Address: 6150 PORTER RD  
City-St-Zip: SARASOTA, FL 34240 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: DEWANA M.LEONARD

MGRM

01/08/2009

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