

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000041611

**FILED**  
**Apr 27, 2009**  
**Secretary of State**

**Entity Name:** T-REX DEPENDABLE DRIVER LEASE LLC

**Current Principal Place of Business:**

7628 J. F. KENNEDY DRIVE WEST  
JACKSONVILLE, FL 32219 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 2113  
JACKSONVILLE, FL 32203

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

MCKENZY, TERRENCE L MGRM  
7628 J. F. KENNEDY DRIVE WEST  
JACKSONVILLE, FL 32219 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: MCKENZY, TERRENCE L MGRM  
Address: 7628 J. F. KENNEDY DRIVE WEST  
City-St-Zip: JACKSONVILLE, FL 32219 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: TERRENCE MCKENZY MGRM 04/27/2009

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