

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000098857

FILED
Apr 29, 2009
Secretary of State

Entity Name: CUSTOM OFF ROAD ESSENTIALS, LLC

Current Principal Place of Business:

9013 GLENARM WAY
WEEKI WACHEE, FL 34613

New Principal Place of Business:

Current Mailing Address:

9013 GLENARM WAY
WEEKI WACHEE, FL 34613

New Mailing Address:

FEI Number: 26-3809514

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TORRES, BOBBI
9013 GLENARM WAY
WEEKI WACHEE, FL 34613 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: MGR () Delete
Name: WALSH, RYAN
Address: 9620 OSCEOLA DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WALSH, RYAN
Address: 9620 OSCEOLA DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: MGRM () Change (X) Addition
Name: TORRES, BOBBI A
Address: 9013 GLENARM WAY
City-St-Zip: WEEKI WACHEE, FL 34613

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: BOBBI TORRES

MGRM

04/29/2009

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