

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000080561

**FILED**  
**Jan 27, 2011**  
**Secretary of State**

**Entity Name:** CHAPPELL RENTALS LLC

**Current Principal Place of Business:**

1839 S. LANE AVE  
SUITE 202  
JACKSONVILLE, FL 32210

**New Principal Place of Business:**

**Current Mailing Address:**

1839 S. LANE AVE  
SUITE 202  
JACKSONVILLE, FL 32210

**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:**

CHAPPELL, DAVID L JR  
1839 S. LANE AVE  
SUITE 202  
JACKSONVILLE, FL 32210 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  
Name: CHAPPELL, DAVID L JR  
Address: 1839 S. LANE AVE SUITE 202  
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: MGRM  
Name: CHAPPELL, BETTY J  
Address: 1839 S. LANE AVE SUITE 202  
City-St-Zip: JACKSONVILLE, FL 32210 US

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: BETTY J CHAPPELL                      MGRM                      01/27/2011

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