

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000091275

**FILED**  
**Apr 14, 2011**  
**Secretary of State**

**Entity Name:** SOUTHEASTERN HAY & NURSERY, LLC

**Current Principal Place of Business:**

ONE DAYTONA BLVD  
DAYTONA BEACH, FL 32114

**New Principal Place of Business:**

**Current Mailing Address:**

ONE DAYTONA BLVD  
DAYTONA BEACH, FL 32114

**New Mailing Address:**

**FEI Number:** 47-0861745

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SCHARBACK, BRETT M  
ONE DAYTONA BLVD  
DAYTONA BEACH, FL 32114 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  
**Name:** EVENT EQUIPMENT LEASING, LLC  
**Address:** ONE DAYTONA BLVD  
**City-St-Zip:** DAYTONA BEACH, FL 32114

**Title:** P  
**Name:** GURTIS, ANDREW H  
**Address:** ONE DAYTONA BOULEVARD  
**City-St-Zip:** DAYTONA BEACH, FL 32114 US

**Title:** S  
**Name:** CROTTY, W. GARRETT  
**Address:** ONE DAYTONA BOULEVARD  
**City-St-Zip:** DAYTONA BEACH, FL 32114 US

**Title:** T  
**Name:** HOUSER, DANIEL W  
**Address:** ONE DAYTONA BOULEVARD  
**City-St-Zip:** DAYTONA BEACH, FL 32114 US

**Title:** AS  
**Name:** SCHARBACK, BRETT M  
**Address:** ONE DAYTONA BOULEVARD  
**City-St-Zip:** DAYTONA BEACH, FL 32114 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:** BRETT M. SCHARBACK

SEC

04/14/2011

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