

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000125342

**FILED**  
**Jan 31, 2012**  
**Secretary of State**

**Entity Name:** SOUTHEAST EQUIPMENT SERVICES, LLC

**Current Principal Place of Business:**

4771 DRANE FIELD RD  
UNIT 103  
LAKELAND, FL 33811

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 33336  
INDIALANTIC, FL 32903

**New Mailing Address:**

**FEI Number:** 27-4668081

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BOYD, JOEL E ESQ  
360 N BABCOCK ST  
STE 104  
MELBOURNE, FL 32935 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:** MRS.  
**Name:** KEEN, DEBRA K  
**Address:** P.O. BOX33336  
**City-St-Zip:** INDIALANTIC,, FL 32903

**Title:** MR.  
**Name:** KENNEDY, EDWARD A  
**Address:** P.O. BOX 33336  
**City-St-Zip:** INDIALANTIC, FL 32903

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:** DEBRA K KEEN

MRS

01/31/2012

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