

2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT

FILED
Feb 02, 2004 8:00 am
Secretary of State

02-02-2004 90206 030 ****50.00

DOCUMENT # M00000001190

1. Entity Name

STERLING AND WESTERN STAR TRUCKS OF TAMPA,
LLC



Principal Place of Business

7528 US HWY. 301 N.
TAMPA, FL 33637

Mailing Address

7528 US HWY. 301 N.
TAMPA, FL 33637

DO NOT WRITE IN THIS SPACE

% C24004971, , -- 5 , 9 &

01262004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number

91-2051231

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$50.00
Due by May 1, 2004

9. MANAGING MEMBERS/MANAGERS

TITLE MGR
NAME FREIGHTLINER MARKET DEVELOPMENT CORP
STREET ADDRESS 2701 NW VAUGHN STREET, SUITE 776
CITY-ST-ZIP PORTLAND, OR 97210

TITLE MGR
NAME PRIOR, BRAD
STREET ADDRESS 7528 US HWY 301 N
CITY-ST-ZIP TAMPA, FL 33637

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1/26/04

Date

(813) 262-0890

Daytime Phone #