# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M01000001309

SELECTRUCKS OF AMERICA LLC



Principal Place of Business

2701 NW VAUGHN ST., STE. 776 PORTLAND, OR 97210

Mailing Address

PO BOX 157 CPC ACCOUNTING SOUTH SAINT PAUL, MN 55075 US

**FILED** Jan 19, 2007 08:00 AM Secretary of State



01152007 No Chg-LLC

CR2E083 (11/05)

5. Certificate of Status Desired	M	\$5.00 Additional Fee Required	
93-1314297		Not Applicable	
4. FEI Number		Applied For	

## DO NOT WRITE IN THIS SPACE

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

	above named entity submits this statement for the purpose of changing its registere obligations of registered agent.	d office or registered agent, or both, in the State of Florida	I am familiar with, and accept
SIGNA		Agen: signature required when reinstating)	DATE

### Filing Fee is \$50.00 Due by May 1, 2007

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FREIGHTLINER MARKET DEVELOPMENT CORP 2701 NW VAUGHN ST., STE. 776 PORTLAND, OR 97210
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-SI-ZIP	·

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#### DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. 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 of trustee empowered in exempte this report as required by Chapter 608. Florida Statutes

SIGNATURE:

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

NUMBERSON

**5**03-745-8745

Daytime Phone #