

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M04000000418

**FILED**  
**Apr 08, 2010**  
**Secretary of State**

**Entity Name:** ALTAQUIP LLC

**Current Principal Place of Business:**

C/O LEGAL DEPT  
28800 CLEMENS RD  
WESTLAKE, OH 44145

**New Principal Place of Business:**

**Current Mailing Address:**

C/O LEGAL DEPT  
28800 CLEMENS RD  
WESTLAKE, OH 44145

**New Mailing Address:**

**FEI Number:** 38-3689327

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:** P  
**Name:** MCBRIDE, ROBERT D  
**Address:** 28800 CLEMENS RD  
**City-St-Zip:** WESTLAKE, OH 44145

**Title:** VPGM  
**Name:** WIDOWFIELD, JAMES  
**Address:** 11135 ASHBURN STREET  
**City-St-Zip:** FOREST PARK, OH 45240

**Title:** VP  
**Name:** STEPHANS, WILLIAM W  
**Address:** 28800 CLEMENS RD  
**City-St-Zip:** WESTLAKE, OH 44145

**Title:** VPS  
**Name:** SCANLON, PATRICIA M  
**Address:** 28800 CLEMENS RD  
**City-St-Zip:** WESTLAKE, OH 44145

**Title:** T  
**Name:** GRETТА, JOHN  
**Address:** 28800 CLEMENS RD  
**City-St-Zip:** WESTLAKE, OH 44145

**Title:** AS  
**Name:** FOX, JUDY A  
**Address:** 28800 CLEMENS RD  
**City-St-Zip:** WESTLAKE, OH 44145

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:** PATRICIA M. SCANLON

VPS

04/08/2010

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