

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000003053

Entity Name: JRB ATTACHMENTS, LLC

FILED
Apr 16, 2008
Secretary of State

Current Principal Place of Business:

820 GLASER PKWY.
AKRON, OH 44306

New Principal Place of Business:

Current Mailing Address:

4606 E 67TH ST
STE 100
TULSA, OK 74136

New Mailing Address:

5825 COUNCIL STREET NE
CEDAR RAPIDS, IA 52402

FEI Number: 20-1446403

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS ST.
TALLAHASSEE, FL 32301 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: CEO () Delete
Name: VANSANT, R W
Address: 5825 COUNCIL ST. NE
City-St-Zip: CEDAR RAPIDS, IA 52402

Title: VS () Delete
Name: ARMSTRONG, LOREN R
Address: 4606 E 67TH ST STE 100
City-St-Zip: TULSA, OK 74136

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: CEO (X) Change () Addition
Name: BURDAKIN, DAVID
Address: 5825 COUNCIL ST. NE
City-St-Zip: CEDAR RAPIDS, IA 52402

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CFO () Change (X) Addition
Name: KLYN, STEVE
Address: 5825 COUNCIL ST, NE
City-St-Zip: CEDAR RAPIDS, IA 52402

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: STEVE KLYN

CFO

04/16/2008

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