2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 10, 2007
Secretary of State

DOCUMENT# M06000004361

Entity Name: COMMERCIAL CARRIER LOGISTICS, LLC

Current Principal Place of Business:

509 E HWY 92
AUBURNDALE, FL 33823

New Principal Place of Business:

Current Mailing Address:

509 E HWY 92
AUBURNDALE, FL 33823

New Mailing Address:

FEI Number: 20-3267544 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
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: MGR ( ) Delete
Name: FOWLER, THEODORE
Address: PO DRAWER 67
City-St-Zip: AUBURNDALE, FL 33823

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

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

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: FOWLER, THEODORE
Address: 509 E HWY 92
City-St-Zip: AUBURNDALE, FL 33823

Title: MGR ( ) Change (X) Addition
Name: STRAUGHN, RICHARD E
Address: 502 E BRIDGERS AVENUE
City-St-Zip: AUBURNDALE, FL 33823

Title: MGR ( ) Change (X) Addition
Name: FOX, ROBERT Y
Address: 502 E BRIDGERS AVENUE
City-St-Zip: AUBURNDALE, FL 33823

I hereby certify that the information supplied with this filing does not qualify for the 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: RICHARD E STRAUGHN MGR 04/10/2007

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