


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 21, 2008 8:00 am
Secretary of State

07-21-2008 90081 038 ***538.75

DOCUMENT # M06000005590					
1. Entity Name MORGAN TRUCK BODY, LLC					
Principal Place of Business 1100 LOUISIANA STREET, SUITE 5400 HOUSTON, TX 77002			Mailing Address 1100 LOUISIANA STREET, SUITE 5400 HOUSTON, TX 77002		
2. Principal Place of Business - No P.O. Box # 4434 MAIN AVE		3. Mailing Address 35 THOUSAND OAKS BLVD			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. P.O. BOX 588			
City & State LAKE LAND, FL		City & State MORGANTOWN, PA		4. FEI Number 25-1151457	
Zip 338019773		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$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			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$538.75 Due by September 12, 2008				Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE	MGR <input checked="" type="checkbox"/> Delete		TITLE	PRESIDENT, COO <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	POINDEXTER, JOHN B		NAME	NORB MARKERT	
STREET ADDRESS	1100 LOUISIANA STREET, SUITE 5400		STREET ADDRESS	35 THOUSAND OAKS BLVD.	
CITY-ST-ZIP	HOUSTON, TX 77002		CITY-ST-ZIP	MORGANTOWN, PA 19543	
TITLE	MGR <input checked="" type="checkbox"/> Delete		TITLE	VCE PRESIDENT, CFO <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	MAGEE, STEPHEN		NAME	STEVE BAKER	
STREET ADDRESS	1100 LOUISIANA STREET, SUITE 5400		STREET ADDRESS	35 THOUSAND OAKS BLVD.	
CITY-ST-ZIP	HOUSTON, TX 77002		CITY-ST-ZIP	MORGANTOWN, PA 19543	
TITLE	<input type="checkbox"/> Delete		TITLE	VICE PRESIDENT PURCHASING <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME			NAME	RANDY JENKINS	
STREET ADDRESS			STREET ADDRESS	35 THOUSAND OAKS BLVD	
CITY-ST-ZIP			CITY-ST-ZIP	MORGANTOWN, PA 19543	
TITLE	<input type="checkbox"/> Delete		TITLE	VCE PRESIDENT ENGINEERING <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME			NAME	WILLIAM J. KROPPE	
STREET ADDRESS			STREET ADDRESS	35 THOUSAND OAKS BLVD.	
CITY-ST-ZIP			CITY-ST-ZIP	MORGANTOWN, PA 19543	
TITLE	<input type="checkbox"/> Delete		TITLE	VCE PRESIDENT SALES <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME			NAME	GENE AYRES	
STREET ADDRESS			STREET ADDRESS	35 THOUSAND OAKS BLVD	
CITY-ST-ZIP			CITY-ST-ZIP	MORGANTOWN, PA 19543	
TITLE	<input type="checkbox"/> Delete		TITLE	VICE PRESIDENT OPERATIONS <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME			NAME	PETE EGGBEATS	
STREET ADDRESS			STREET ADDRESS	35 THOUSAND OAKS BLVD	
CITY-ST-ZIP			CITY-ST-ZIP	MORGANTOWN, PA 19543	
11. I hereby certify that the information supplied with this filing 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 or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>			Date 7/10/08 (610) 286-5025 <small>Daytime Phone #</small>		

50008613

