

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000066124

**Entity Name:** BBJ&T EQUIPMENT COMPANY, LLC

**Current Principal Place of Business:**

3045 BOBCAT VILLAGE CENTER ROAD  
NORTH PORT, FL 34288

**Current Mailing Address:**

3045 BOBCAT VILLAGE CENTER ROAD  
NORTH PORT, FL 34288 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

SUTTON, MICHAEL A  
3045 BOBCAT VILLAGE CENTER ROAD  
NORTH PORT, FL 34288 US

*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

**Authorized Person(s) Detail :**

Title MGR  
Name SUTTON, MICHAEL A  
Address 2449 YORKSHIRE DRIVE  
City-State-Zip: SARASOTA FL 34231

Title MGR  
Name CARROLL, AARON  
Address 1767 BAYWOOD DRIVE  
City-State-Zip: SARASOTA FL 34231

Title AMBR  
Name SUTTON, BRIELLE  
Address 2449 YORKSHIRE DRIVE  
City-State-Zip: SARASOTA FL 34231

Title AMBR  
Name CARROLL, BRODY  
Address 1767 BAYWOOD DRIVE  
City-State-Zip: SARASOTA FL 34231

Title AMBR  
Name CARROLL, TEAGAN  
Address 1767 BAYWOOD DRIVE  
City-State-Zip: SARASOTA FL 34231

Title AMBR  
Name CARROLL, JAGGER  
Address 1767 BAYWOOD DRIVE  
City-State-Zip: SARASOTA FL 34231

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** AARON W CARROLL

**MANAGER**

02/14/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date