## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000101849

Entity Name: WALLACE SUZUKI, LLC

City-St-Zip:

FILED Mar 24, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 5555 U.S. HIGHWAY 1 FORT PIERCE, FL 34982 **Current Mailing Address: New Mailing Address:** 3801 S.E. FEDERAL HIGHWAY STUART, FL 34997 FEI Number: 20-3647850 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: STANLEY, CAROL M WALLACE, WILLIAM L 29 N.E. 4TH AVENUE 3801 S.E. FEDERAL HWY STUART, FL 34997 DELRAY BEACH, FL 33483 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: WILLIAM L WALLACE 03/24/2006 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete WALLACE AUTOMOTIVE M, ANAGEMENT CORP O RATION, Name: Name: Address: 3801 S.E. FEDERAL HIGHWAY Address: City-St-Zip: STUART, FL 34997 City-St-Zip: Title: Title: PRES ( ) Change (X) Addition ( ) Delete Name: Name: WALLACE, WILLIAM L Address: Address: 1472 S OCEAN AVE City-St-Zip: City-St-Zip: PALM BEACH, FL 33480 Title: () Delete Title: VP S ( ) Change (X) Addition SMITH, D.LEE Name: Name: 175 DOVE CIRCLE Address: Address: City-St-Zip: City-St-Zip: ROYAL PALM BEACH, FL 33411 ( ) Change (X) Addition Title: () Delete Title: Name: Name: POWELL, JUDITH L 494 KRUEGER CREEK PL Address: Address:

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.

City-St-Zip:

STUART, FL 34996

SIGNATURE: JUDITH L POWELL S 03/24/2006