2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

Secretary of State DOCUMENT # L98000002089 01-19-2005 90026 007 ****50.00 1. Entity Name SONIC - FM AUTOMOTIVE, LLC Principal Place of Business Mailing Address 13880 S. TAMIAMI TRAIL 13880 S. TAMIAMI TRAIL FT. MYERS, FL 33912 FT. MYERS, FL 33912 2. Principal Place of Business 3. Maiting Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01042005 CR2E083 (10/03) Chg-LLC City & State City & State 4 FFI Number Applied For 59-3535971 Not Applicable Ζiρ Country Country Zip \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 City 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) sre, typed or printed name of registered agent and title if applicable. DATE Filing Fee is \$50.00 Make check payable to Due by May 1, 2005 Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10. VP-T MGR TITLE TITLE Addition ☐ netere ☐ Channe Wyatt, Jr., E. Lee SMITH, O. BRUTON NAME NAME 10512 Lady Grace Lane STREET ADORESS 5401 E. INDEPENDENCE BLVD. STREET ADDRESS CITY-ST-7/P CHARLOTTE, NC 28218 DIY-ST-ZP Charlotte, NC 28270 MGR TOLE ☐ Delete TITLE ☐ Change K Addition MALIE SMITH, B. SCOTT NAME Coss, Stephen K. STREET ADDRESS 5401 E. INDEPENDENCE BLVD. STREET ADDRESS 2831 Giverny Drive CITY-ST-ZP CHARLOTTE, NC 28218 CITY-ST-ZP Charlotte, NC 28226 TITLE MGR **⊠** Delete TITLE Change **R** Addition WRIGHT, THEODORE M NAME NAME Mullins, Michael E. STREET ADDRESS 5401 E. INDEPENDENCE BLVD. STREET ADDRESS 3905 Vasconia Street CITY-ST-ZIP CHARLOTTE, NC 28218 OTY-ST-ZIP Tampa, FL 33629 MLE. ☐ Delete TITLE AS/AT ☐ Change XX Addition O'Connor, Joseph 7200 Graybeard Ct NAME IUPPENLATZ, MARK NAME STREET ADORESS 2911 PROVIDENCE TRAIL LANE STREET ADDRESS CITY-ST-ZIP CHARLOTTE, NC 28270 CITY-ST-7/P Charlotte, NC 28226 mu ☐ Delete TITL F Addition ☐ Change PLUMMER, DAVID NAME STREET ADDRESS 5901 AVELON VALLEY, #938 STREET ADDRESS CITY-ST-78P CHARLOTTE, NC 28277 CITY-ST-ZIP TITLE ☐ Delete IIII F ☐ Change ☐ Addition NAME LIPARI, LOU NAME STREET ADDRESS 10418 SPRINGROSE DRIVE STREET ADDRESS CITY-ST-7/P **TAMPA, FL 33626** CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 puspee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

FILED

Jan 19, 2005 8:00 am