## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Mar 22, 2005 08:00 AM Secretary of State

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DOCUMENT # M0000 1. Entity Name COGGIN CHEVROLET L.L.C.	
Principal Place of Business	Mailing Address
4306 PABLO OAKS COURT JACKSONVILLE, FL 32224	_PO BOX 16469  acksonville, fl 32245-6469



## DO NOT WRITE IN THIS SPACE

03172005No Chg-LLC CR2E083 (10/03)

4. FEI Number 59-3624905	Applied For Not Applicable
5. Certificate of Status Desired	\$5.00 Additional Fee Required

NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE

6. Name and Address of Current Registered Agent

SUITE 4 WESTON, FL 33331

## DO NOT WRITE IN THIS SPACE

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SIGNATURE.	Signature, typod or printed name of registered agent and title if applicable.	(NOTE, Registered Agent signature required when reinstating)	DATE	
F	iling Fee is \$50.00 ue by May 1, 2005			
9.	MANAGING MEMBERS/MANAGERS		· — ;	-
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR TOMM, CHARLIE 4306 PABLO OAKS CT JACKSONVILLE, FL 32224			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MARLETTE, LINDA L 4305 PABLO OAKS CT JACKSONVILLE, FL 32224		U3/22/U5-8000S-006 S0.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				

11. I hereby certify that the information supplied with this filling 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 trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

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