

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000012078

FILED
Mar 14, 2008
Secretary of State

Entity Name: GREENLIGHT AUTO LAND, LLC

Current Principal Place of Business:

9001 E COLONIAL DR
ORLANDO, FL 32817

New Principal Place of Business:

Current Mailing Address:

9001 E COLONIAL DR
ORLANDO, FL 32817

New Mailing Address:

FEI Number: 20-1030025

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOWLER WHITE BOGGS BANKER P.A.
50 N LAURA ST, STE 2200
JACKSONVILLE, FL 32202 US

Name and Address of New Registered Agent:

FOWLER WHITE BOGGS BANKER P.A.
C/O MICHAEL E. GOODBREAD, JR.
50 N LAURA ST, STE 2200
JACKSONVILLE, FL 32202 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:

03/14/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: P () Delete
Name: RODRIGUEZ, FRANK J
Address: 9001 E. COLONIAL DRIVE
City-St-Zip: ORLANDO, FL 32817

Title: V () Delete
Name: ATKINSON, CARL R
Address: 9001 E. COLONIAL DRIVE
City-St-Zip: ORLANDO, FL 32817

Title: T () Delete
Name: ALDEN, EDWARD M
Address: 9001 E. COLONIAL DRIVE
City-St-Zip: ORLANDO, FL 32817

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: EDWARD ALDEN

T

03/14/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date