

2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L02000022715

FILED
Oct 31, 2008
Secretary of State**Entity Name:** 10-2002, LLC**Current Principal Place of Business:**50 CENTRAL AVE, SUITE 900
SARASOTA, FL 34236**New Principal Place of Business:****Current Mailing Address:**50 CENTRAL AVE, SUITE 900
SARASOTA, FL 34236**New Mailing Address:****FEI Number:** 06-1645440**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**TOSCH, JOHN E ESQ
50 CENTRAL AVENUE
SUITE 900
SARASOTA, FL 34236 US**Name and Address of New Registered Agent:**

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**MANAGING MEMBERS/MANAGERS:****Title:** MGRM () Delete
Name: BUCHANAN, VERNON G
Address: 50 CENTRAL AVENUE SUITE 900
City-St-Zip: SARASOTA, FL 34236**Title:** P () Delete
Name: BUCHANAN, VERNON G
Address: 50 CENTRAL AVE, SUITE 900
City-St-Zip: SARASOTA, FL 34236**Title:** VPS () Delete
Name: TOSCH, JOHN
Address: 50 CENTRAL AVE, SUITE 900
City-St-Zip: SARASOTA, FL 34236**Title:** T () Delete
Name: HITEMAN, STEVE H
Address: 50 CENTRAL AVE, SUITE 900
City-St-Zip: SARASOTA, FL 34236**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:**Title:** MEMB (X) Change () Addition
Name: TD AUTOMOTIVE HOLDIN, GS, INC
Address: P.O. BOX 52
City-St-Zip: PORT RICHEY, FL 34673

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: JOHN TOSCH

VPS

10/31/2008

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