

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000014494

Entity Name: BUD'S WRECKING YARD LLC

Current Principal Place of Business:

19919 HWY 301 NORTH
DADE CITY, FL 33523

Current Mailing Address:

P. O. BOX 1332
DADE CITY, FL 33526 13

FEI Number: 74-3158615

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SANDERSON, SHEILA
13851 US HWY 98 BYPASS
DADE CITY, FL 33525 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: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title MGRM
Name SANDERSON, CLAUDE D
Address 13851 US HWY 98 BYPASS
City-State-Zip: DADE CITY FL 33525

Title MGRM
Name SANDERSON, SHEILA
Address 13851 US HWY 98 BYPASS
City-State-Zip: DADE CITY FL 33525

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SHEILA SANDERSON

MGRM

04/26/2016

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date