

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000105367

**Entity Name:** U.S. AUTO CREDIT PURCHASING CENTER, LLC**Current Principal Place of Business:**8375 DIX ELLIS TRAIL  
SUITE 300  
JACKSONVILLE, FL 32256**Current Mailing Address:**1725 MEMORIAL PARK DRIVE  
JACKSONVILLE, FL 32204 US**FEI Number:** 27-3647633**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ACKMAN, JOANNE A  
1725 MEMORIAL PARK DRIVE  
JACKSONVILLE, FL 32204 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	SECRETARY TREASURER
Name	CURRY, JEFFERY S
Address	1725 MEMORIAL PARK DRIVE
City-State-Zip:	JACKSONVILLE FL 32204

Title	VP
Name	GRAHAM, ALEXANDER M
Address	1725 MEMORIAL PARK DRIVE
City-State-Zip:	JACKSONVILLE FL 32204

Title	VP
Name	GRAHAM, HAMPTON H
Address	1725 MEMORIAL PARK DRIVE
City-State-Zip:	JACKSONVILLE FL 32204

Title	PRESIDENT
Name	WIMBERLY, ROYCE GLYNN
Address	8375 DIX ELLIS TRAIL SUITE 300
City-State-Zip:	JACKSONVILLE FL 32256

*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:** JEFFERY S CURRY**SECRETARY****01/17/2018**

Electronic Signature of Signing Authorized Person(s) Detail

Date