

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000016926

**Entity Name:** CAPITAL CITY AUTOMOTIVE LLC

**Current Principal Place of Business:**

2516 WEST TENNESSEE STREET  
TALLAHASSEE, FL 32304

**Current Mailing Address:**

2516 WEST TENNESSEE STREET  
TALLAHASSEE, FL 32304 US

**FEI Number:** 46-1940502

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

D'AMICO, ANTHONY R  
3608 BILTMORE AVE  
TALLAHASSEE, FL 32311 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	Title	MGR
Name	D'AMICO, ANTHONY R	Name	D'AMICO, KIMBERLY S
Address	3608 BILTMORE AVE	Address	3608 BILTMORE AVE
City-State-Zip:	TALLAHASSEE FL 32311	City-State-Zip:	TALLAHASSEE FL 32311
Title	MGR		
Name	HUSTON, AMANDA R		
Address	2516 WEST TENNESSEE STREET		
City-State-Zip:	TALLAHASSEE FL 32304		

*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:** KIMBERLY D'AMICO

**MANAGER**

**04/23/2014**

Electronic Signature of Signing Authorized Person(s) Detail

Date