

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000181005

**Entity Name:** CCR PARTS LLC

**Current Principal Place of Business:**

820 NE 24TH LANE  
102  
CAPE CORAL, FL 33909

**Current Mailing Address:**

1001 BUTLER RD  
NORTH FORT MYERS, FL 33917

**FEI Number:** 81-4039170

**Certificate of Status Desired:** Yes

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

LEDGER, ROBERT  
1001 BUTLER RD  
NORTH FORT MYERS, FL 33917 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 MGR  
Name LEDGER, ROBERT  
Address 1001 BUTLER RD  
City-State-Zip: NORTH FORT MYERS FL 33917

*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:** ROBERT LEDGER

**OWNER**

**03/28/2017**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date