

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000161730

**Entity Name:** A N B AUTO REPAIR L.L.C.

**Current Principal Place of Business:**

625 NE 36 TH AVE  
OCALA, FL 34470

**Current Mailing Address:**

625 NE 36TH AVE  
OCALA, FL 34470

**FEI Number:** 84-2272835

**Certificate of Status Desired:** No

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

BRIAN, WATSON G  
625 NE 36TH AVE  
OCALA, FL 34470 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 WRIGHT, ASHLEY M  
Address 1411 S PINE AVE  
City-State-Zip: Ocala FL 34471

*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:** ASHLEY WRIGHT

MANAGER

03/17/2020

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

\_\_\_\_\_ Date