

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000004278

FILED
Jul 07, 2004
Secretary of State

Entity Name: CAPITAL AUCTION REMARKETING, L.C.

Current Principal Place of Business:

3143 INTERNATIONAL SPEEDWAY BLVD.
DAYTONA BEACH, FL 32124

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2689
DAYTONA BEACH, FL 32115

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MISKOTTEN, KIM S
4641 S. ATLANTIC AVENUE
PONCE INLET, FL 32127 US

Name and Address of New Registered Agent:

MISKOTTEN, KIM S
4641 S. ATLANTIC AVENUE, #203
PONCE INLET, FL 32127 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: KIM S. MISKOTTEN

07/07/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: MISKOTTEN, CARL J JR.
Address: 12721 MARSH ROAD #B
City-St-Zip: SHELBYVILLE, MI 49344

Title: MGRM () Delete
Name: MISKOTTEN, KIM S
Address: 4641 S. ATLANTIC AVENUE
City-St-Zip: PONCE INLET, FL 32127

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MISKOTTEN, CARL J JR.
Address: 824 PARK ST.
City-St-Zip: SAUGATUCK, MI 49453

Title: MGRM (X) Change () Addition
Name: MISKOTTEN, KIM S
Address: 4641 S. ATLANTIC AVENUE, #203
City-St-Zip: PONCE INLET, FL 32127

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: KIM S. MISKOTTEN

MGRM

07/07/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date