

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000007764

FILED
Apr 28, 2006
Secretary of State

Entity Name: WILLIAMSON SATURN OF MIAMI LAKES, LLC

Current Principal Place of Business:

6200 NW 167 ST
MIAMI LAKES, FL 33014

New Principal Place of Business:

300 S. UNIVERSITY DR
PEMBROKE PINES, FL 33025

Current Mailing Address:

7815 SW 104 ST
MIAMI, FL 33156

New Mailing Address:

300 S. UNIVERSITY DR
PEMBROKE PINES, FL 33025

FEI Number: 65-1030360

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMSON, GEORGE E II
7815 SW 104 ST
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

REYES, VIVIAN
300 S. UNIVERSITY DR
PEMBROKE PINES, FL 33025 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: VIVIAN REYES

04/28/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WILLIAMSON, GEORGE II
Address: 7815 SW 104 ST
City-St-Zip: MIAMI, FL 33156

Title: MGRM (X) Delete
Name: WILLIAMSON, THOMAS W
Address: 7815 SW 104 ST
City-St-Zip: MIAMI, FL 33156

Title: MGRM (X) Delete
Name: VERA, LOUIS
Address: 7815 SW 104 ST
City-St-Zip: MIAMI, FL 33156

Title: MGRM (X) Delete
Name: WILLIAMSON, CAROL F
Address: 7815 SW 104 ST
City-St-Zip: MIAMI, FL 33156

Title: MGRM () Delete
Name: REYES, VIVIAN
Address: 7815 SW 104 ST
City-St-Zip: MIAMI, FL 33156

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: VERA, LOUIS
Address: 300 S. UNIVERSITY DR
City-St-Zip: PEMBROKE PINES, FL 33025

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: REYES, VIVIAN
Address: 300 S. UNIVERSITY DR
City-St-Zip: PEMBROKE PINES, FL 33025

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: VIVIAN REYES

MGRM

04/28/2006

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