


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 20, 2005 8:00 am
Secretary of State

04-20-2005 90034 034 ****50.00

DOCUMENT # L00000008930 1. Entity Name AUTO VENTURE, LLC	
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Principal Place of Business 217 JOHN KNOX ROAD TALLAHASSEE, FL 32303	Mailing Address POST OFFICE BOX 4288 TALLAHASSEE, FL 32315-4288
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DO NOT WRITE IN THIS SPACE



04142005No Chg-LLC

CR2E083 (10/03)

4. FEI Number 59-3662542	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent BUFORD, A.L. III 217 JOHN KNOX ROAD TALLAHASSEE, FL 32303	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *A.L. Buford III* DATE 4/15/05

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BUFORD, A.L. JR 7355 HEARTLAND CIRCLE TALLAHASSEE, FL 32312
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BUFORD, A.L. III 6295 BLACK FOX WAY TALLAHASSEE, FL 32312
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**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify 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 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: *A.L. Buford III* A.L. Buford III DATE 4/15/05 850-385-6363

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #