

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000012001

FILED  
Apr 23, 2007  
Secretary of State

Entity Name: EXECUTIVE AUTO COLLISION, LLC

**Current Principal Place of Business:**

7875 S.E. 131ST PLACE  
SUMMERFIELD, FL 34491

**New Principal Place of Business:**

**Current Mailing Address:**

7875 S.E. 131ST PLACE  
SUMMERFIELD, FL 34491 US

**New Mailing Address:**

FEI Number: 59-3674774

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

VETTO, GARY A  
7086 SW 97TH PLACE  
OCALA, FL 34476 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: VETTO, GARY A  
Address: 7086 S.W. 97TH PLACE  
City-St-Zip: OCALA, FL 34476 US

Title: MGR ( ) Delete  
Name: VETTO, NANCY LEE  
Address: 5730 CRESTVIEW DRIVE  
City-St-Zip: LADY LAKE, FL 32159 US

**ADDITIONS/CHANGES:**

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

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

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: GARY VETTO

MGR

04/23/2007

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