

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90126 033 ****50.00

DOCUMENT # L01000012229

1. Entity Name
CENTRAL AUTOMOTIVE GROUP, LLC



Principal Place of Business
**535 SILVER BEACH AVENUE
DAYTONA BEACH, FL 32118 US**

Mailing Address
**535 SILVER BEACH AVENUE
DAYTONA BEACH, FL 32118 US**

2. Principal Place of Business
42 S Peninsula Dr

3. Mailing Address
42 S Peninsula Dr

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01092004 Chg-LLC CR2E083 (10/03)

City & State
Daytona Beach FL

City & State
Daytona Beach FL

4. FEI Number
59-3733134

Applied For
☐ Not Applicable

Zip Country
32118 Volusia

Zip Country
32118 Volusia

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

**STEWART & ASSOCIATES, P.A.
535 SILVER BEACH AVENUE
DAYTONA BEACH, FL 32118**

7. Name and Address of New Registered Agent

Name
Stewart, Charles Jr.

Street Address (P.O. Box Number is Not Acceptable)
42 S Peninsula Dr

City
Daytona Beach FL

Zip Code
32118

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 **X CHARLES W. STEWART, JR.**

Charles W. Stewart Jr.

X 1/26/04

(NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00
Due by May 1, 2004**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS / MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**MGRM
ANDERSON, GEORGE
3010 PENINSULA DRIVE
DAYTONA BEACH, FL 32118**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**MGRM
SENKOVICH, MICHAEL A
108 MERGANSER CIRCLE
PORT ORANGE, FL 32119**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

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CITY-ST-ZIP

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10. ADDITIONS / CHANGES

☐ Change ☐ Addition

☐ Change ☐ Addition

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☐ Change ☐ Addition

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: **X George A. Anderson**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

X 4-28-2004

Date Daytime Phone #