

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000019215

FILED  
Jun 15, 2005  
Secretary of State

**Entity Name:** UNIVERSAL MOTOR FINANCE LLC

**Current Principal Place of Business:**

10695 BEACH BLVD., SUITE 3  
JACKSONVILLE, FL 32246

**New Principal Place of Business:**

7601 CENTURION PARKWAY  
JACKSONVILLE, FL 32256

**Current Mailing Address:**

7800 BELFORT PARKWAY  
SUITE 165  
JACKSONVILLE, FL 32256

**New Mailing Address:**

7601 CENTURION PARKWAY  
JACKSONVILLE, FL 32256

**FEI Number:** 59-3752217      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

OWEN, GEORGE E JR.  
144 FIRST AVENUE SOUTH, SUITE 500  
ST. PETERSBURG, FL 33701 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: MGRM ( ) Delete  
Name: CROPPER, M. STEVEN  
Address: 10695 BEACH BLVD., SUITE 3  
City-St-Zip: JACKSONVILLE, FL 32246

Title: MGRM (X) Delete  
Name: BUTTNER, EDWARD W IV  
Address: 7800 BELFORT PARKWAY, SUITE 165  
City-St-Zip: JACKSONVILLE, FL 32256

**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 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: DEBORAH A MCLEOD

VP

06/15/2005

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