

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000005941

**FILED**  
**Apr 09, 2012**  
**Secretary of State**

**Entity Name:** DIXIE CUSTOM AUTOMOTIVE, LLC

**Current Principal Place of Business:**

4533 AVENUE A  
ST. AUGUSTINE, FL 32095

**New Principal Place of Business:**

**Current Mailing Address:**

4533 AVENUE A  
ST. AUGUSTINE, FL 32095

**New Mailing Address:**

**FEI Number:** 76-0722355

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GENOVAR, PHILIP B  
4533 AVENUE A  
ST. AUGUSTINE, FL 32095 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  
**Name:** GENOVAR, PHILIP B TRUSTEE  
**Address:** 4533 AVENUE A  
**City-St-Zip:** ST. AUGUSTINE, FL 32095

**Title:** S  
**Name:** JENSEN, SONYA G  
**Address:** 320A SR 312  
**City-St-Zip:** SAINT AUGUSTINE, FL 32086

I hereby 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:** PHILIP B GENOVAR

MGRM

04/09/2012

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