

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000011955

**FILED**  
**Jan 19, 2011**  
**Secretary of State**

**Entity Name:** TAMPA AUTO SERVICE, LLC

**Current Principal Place of Business:**

6313 SOUTH QUEENSWAY DRIVE  
TEMPLE TERRACE, FL 33617

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 16548  
TAMPA, FL 336876548

**New Mailing Address:**

**FEI Number:** 71-0888085

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHRISTIEN, ROBERT H  
6313 S QUEENSWAY DR  
TAMPA, FL 336172435 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: CHRISTIEN, ANNE-MARIE C  
Address: 6313 S.QUEENSWAY DR  
City-St-Zip: TEMPLE TERRACE, FL 336172435 US

Title: MGRM  
Name: CHRISTIEN, ROSELYNE V  
Address: 6313 S.QUEENSWAY DR  
City-St-Zip: TEMPLE TERRACE, FL 336172435 US

Title: MGRM  
Name: CHRISTIEN, MIREILLE C  
Address: 6313 S.QUEENSWAY DR  
City-St-Zip: TEMPLE TERRACE, FL 336172435 US

Title: MGRM  
Name: CHRISTIEN, ROBERT H  
Address: 6313 S.QUEENSWAY DR  
City-St-Zip: TEMPLE TERRACE, FL 336172435 US

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: ANNE-MARIE CHRISTIEN

MGRM

01/19/2011

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