

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000013142

FILED  
Jul 09, 2007  
Secretary of State

Entity Name: STEMBRIDGE AUTO SALES, LLC

**Current Principal Place of Business:**

1407 OLD DIXIE HWY  
ST. AUGUSTINE, FL 32084

**New Principal Place of Business:**

**Current Mailing Address:**

1407 OLD DIXIE HWY  
ST. AUGUSTINE, FL 32084

**New Mailing Address:**

FEI Number: 06-1661213      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:**

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

STEMBRIDGE, SHIRLEY L  
32 BRIARVIEW LANE  
PALM COAST, FL 32137      US

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:**

**ADDITIONS/CHANGES:**

Title: MGR      ( ) Delete  
Name: STEMBRIDGE, SHIRLEY  
Address: 32 BRIAR VUE LN  
City-St-Zip: PALM COAST, FL 32137

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

Title: MGR      ( ) Delete  
Name: MCKAY, LARRY  
Address: 32 BRIAR VUE LN  
City-St-Zip: PALM COAST, FL 32137

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

Title: MGR      (X) Delete  
Name: MCKAY, KEVIN  
Address: 2061 SWAREZ AVE.  
City-St-Zip: ST. PETERSBURG, FL 32086

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

I hereby certify that the information supplied with this filing does not qualify 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: SHIRLEY L. STEMBRIDGE

MANA

07/09/2007

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