## LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

'DOCUMENT # L02000035032

.1. Entity Name

BRANDON VOLKSWAGON, L.L.C.



## FILED Apr 02, 2003 8:00 am Secretary of State

04-02-2003 90013 007 \*\*\*\*50.00

en in all all contrata de la companie de la companie de la companie de la contrata de la companie de la compan	
2. Principal Place of Business	3. Mailing Address
9207 ADAMO DRIVE	9207 ADAMO DRIVE EAST
Suite, Apt. #, etc.	Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State		City & State	70.5	4. FEI Number	Applied For	
TAMPA, FLORI	[DA	TAMPA, FLOR	RIDA	51-0440858	Not Applicable	
Zip 33619	Country USA	Zip 33619	Country USA	5. Certificate of Status Desired		5.00 Additional ee Required
entres regrandes actions of the same of the same	en de une de la laction de la company de			7 Name and Address of Current I	Registered	Agent

## DO NOT WRITE IN THIS SPACE

	7. Name and Address of Current Registered Agent										
Name	MCDERMOTT	r, MICHA	EL J ES	SQ.							
_ Street Ad	dress (P.O. Box Nu	mber.is.Not Ac		-	-						
		-	52.00 EV	,	-						
City	BRANDON			FI	Zip Code						

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.

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SIGNAT	UHE

Signature, typed or printed name of registered agent and title if applicable.

DAT

FEE IS \$50.00

Make Check Payable to Florida Department of State

DUE BY MAY 1

MANAGING MEMBERS / MANAGERS

	DOC BY MALL									
9.	MANAGING MEMBERS/MANAGERS									
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM S. WOODS ENTERPRISES, INC. 9207 ADAMO DRIVE EAST TAMPA, FLORIDA 33619	TITLE NAME STREET ADDRESS CITY ST-ZIP	DEC 113/02							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TATION, TECHNOLOGY	TITLE NAME STREET ADDRESS CITY: ST-ZIP	4,54							
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY: ST. ZIP								

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 of trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

S. L. WOODS PRESIDENT

03/26/2003

813.620.4300 🛪