

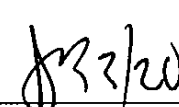



2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000005968 1. Entity Name 10-3003 SUNCOAST DEALERSHIP, LLC			
Principal Place of Business 707 SOUTH WASHINGTON BOULEVARD SARASOTA, FL 34236		Mailing Address 707 SOUTH WASHINGTON BOULEVARD SARASOTA, FL 34236	
2. Principal Place of Business - No P.O. Box # 50 Central Ave. Suite 900 Sarasota, FL 34236		3. Mailing Address 50 Central Ave. Suite 900 Sarasota, FL 34236	
			
		02202007 Chg-LLC CR2E083 (12/06)	
		4. FEI Number 11-3680059	
		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent TOSCH, JOHN E ESQ 707 SOUTH WASHINGTON BOULEVARD SARASOTA, FL 34236		7. Name and Address of New Registered Agent Name Street 50 Central Ave. Suite 900 City Sarasota, FL 34236 State FL 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.			
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
Filing Fee is \$50.00 Due by May 1, 2007		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BUCHANAN, VERNON G 707 SO. WASHINGTON BLVD. SARASOTA, FL 34236	TITLE NAME STREET ADDRESS CITY-ST-ZIP	50 Central Ave. Suite 900 Sarasota, FL 34236
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BUCHANAN, VERNON G 707 S WASHINGTON BLVD SARASOTA, FL 34236	TITLE NAME STREET ADDRESS CITY-ST-ZIP	50 Central Ave. Suite 900 Sarasota, FL 34236
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS TOSCH, JOHN 707 S WASHINGTON BLVD SARASOTA, FL 34236	TITLE NAME STREET ADDRESS CITY-ST-ZIP	50 Central Ave. Suite 900 Sarasota, FL 34236
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T TOMAN, STEVE H 707 S WASHINGTON BLVD SARASOTA, FL 34236	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Steve Hite man 50 Central Ave. Suite 900 Sarasota, FL 34236
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	---
TITLE NAME STREET ADDRESS CITY-ST-ZIP	---	TITLE NAME STREET ADDRESS CITY-ST-ZIP	600094853886 03/27/07--01033--009 **511.25
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.			
SIGNATURE: 		Date 3/8/07 Daytime Phone #	