

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 14, 2008 08:00 AM
Secretary of State

DOCUMENT # L03000009867

1. Entity Name
CARS, TRUCKS AND CREDIT, LLC



Principal Place of Business **Mailing Address**
5323 W. TENNESSEE ST. **5323 W. TENNESSEE ST.**
TALLAHASSEE, FL 32304 **TALLAHASSEE, FL 32304**



01102008 No Chg-LLC CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number **Applied For**
36-4526284 **Not Applicable**

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

PATE, DIANE L
135 ASH BOW TRAIL
HAVANA, FL 32333

**DO NOT WRITE
IN THIS SPACE**

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 _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) **DATE** _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

U00000784915
01/16/08-80074-006 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE **MGR**
NAME **PATE, DIANE L**
STREET ADDRESS **829 THARPE ST**
CITY-ST-ZIP **TALLAHASSEE, FL 32303**

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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 606, Florida Statutes.

SIGNATURE: *Diane Pate*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1-9-08 *850-386-5757*

Date

Daytime Phone #