

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000020715

FILED  
Jan 04, 2005  
Secretary of State

Entity Name: MELBOURNE AUTO IMPORTS, LLC

**Current Principal Place of Business:**

440 S. HARBOR CITY BLVD.  
MELBOURNE, FL 32901

**New Principal Place of Business:**

**Current Mailing Address:**

440 S. HARBOR CITY BLVD.  
MELBOURNE, FL 32901

**New Mailing Address:**

FEI Number: 30-0184610

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HAILE, SHAW & PFAFFENBERGER, PA  
11780 US HIGHWAY ONE, STE. 300  
NORTH PALM BEACH, FL 33408 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/MEMBERS:**

Title: VP ( ) Delete  
Name: PEARSON, PAUL S  
Address: 2384 TREASURE ISLE DR.  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: P ( ) Delete  
Name: EVERATT, RUSSELL L  
Address: 1255 LAUREL CT.  
City-St-Zip: WESTON, FL 33326

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: PEARSON, PAUL S  
Address: 2384 TREASURE ISLE DR.  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: MGR (X) Change ( ) Addition  
Name: EVERATT, RUSSELL L  
Address: 244 MAY APPLE WAY  
City-St-Zip: LANDRUM, SC 29356

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PAUL S PEARSON

MGR

01/04/2005

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