2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000038152

Entity Name: CHARLIE'S NISSAN LLC

City-St-Zip:

PORT SAINT LUCIE, FL 34986

FILED Mar 29, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4405 SO. FEDERAL HWY 4815 SO. FEDERAL HWY FORT PIERCE, FL 34982 FORT PIERCE, FL 34982 **Current Mailing Address: New Mailing Address:** 4405 SO. FEDERAL HWY 4815 SO. FEDERAL HWY FORT PIERCE, FL 34982 FORT PIERCE, FL 34982 FEI Number: 52-2414954 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BECHT, EDWARD W 321 SOUTH SECOND STREET FORT PIERCE, FL 34950 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: MGRM Title: () Change () Addition () Delete FLOYD, MARK C Name: Name: Address: 7310 ELYSE CIRCLE Address: City-St-Zip: PORT ST LUCIE, FL 34952 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition HUDDLESTON, THOMAS W Name: Name: Address: 289 BRAZILIAN CIRCLE Address: City-St-Zip: PORT SAINT LUCIE, FL 34952 City-St-Zip: Title: MGR () Delete Title: () Change () Addition TOWLER, SHERRY L Name: Name: 816 SW LACE CHARLES CIR Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

SIGNATURE: MARK C FLOYD MGRM 03/29/2007