

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000049735

FILED
Mar 20, 2012
Secretary of State

Entity Name: COLLISION CENTER OF PASCO COUNTY, LLC

Current Principal Place of Business:

6415 US HIGHWAY 19
NEW PORT RICHEY, FL 34652 US

New Principal Place of Business:

Current Mailing Address:

6415 US HIGHWAY 19
NEW PORT RICHEY, FL 34652 US

New Mailing Address:

FEI Number: 20-0481965 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

LITTLE, MICHAEL G
911 CHESTNUT STREET
CLEARWATER, FL 33756 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/MANAGERS:

Title: MGR
Name: TIMOTHY, MCCABE
Address: 2351 MESSENGER CIRCLE
City-St-Zip: SAFETY HARBOR, FL 34695 US

I hereby 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: TIMOTHY MCCABE

MGR

03/20/2012

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