


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 31, 2008 08:00 AM
Secretary of State

DOCUMENT # L04000041336 1. Entity Name SELECT AUTOMOTIVE MANAGEMENT, LLC	
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Principal Place of Business 722 APEX RD SUITE A SARASOTA, FL 34240	Mailing Address J. RUSSELL COLKITT 3118 DICK WILSON SR SARASOTA, FL 34240
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DO NOT WRITE IN THIS SPACE

01302008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-1200338	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**COLKITT, J. RUSSELL
3118 DICK WILSON DR
SARASOTA, FL 34240**

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: *J. Russell Colkitt* (NOTE: Registered Agent signature required when reinstating)

DATE: 1-29-08

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SELECT AUTOMOTIVE CAPITOL 3118 DICK WILSON DR SARASOTA, FL 34240
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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: *J. Russell Colkitt, Select Auto Capitol* 1-29-08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE DATE Daytime Phone #

J. Russell Colkitt Select Auto Capitol 1-29-08

DO NOT WRITE IN THIS SPACE

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02/07/08-80041-002 138.75