

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 23, 2005 8:00 am
Secretary of State

03-23-2005 90243 023 ****50.00

DOCUMENT # L04000044614

1. Entity Name
BRODEY AUTOMOTIVE, LLC



Principal Place of Business
**15150 SW 24TH PLACE
DAVIE, FL 33326 US**

Mailing Address
**15150 SW 24TH PLACE
DAVIE, FL 33326 US**

2. Principal Place of Business

15150 SW 24 PL

Suite, Apt. #, etc.

3. Mailing Address

15150 SW 24 PL

Suite, Apt. #, etc.



03172005 Chg-LLC CR2E083 (10/03)

City & State

DAVIE FLA.

City & State

DAVIE FLA.

4. FEI Number

80-0117070

Applied For

Not Applicable

Zip

33326

Country

USA

Zip

33326

Country

USA

5. Certificate of Status Desired ☐

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**BRODEY, ARCHIBALD F
15150 SW 24TH PLACE
DAVIE, FL 33326**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 re-registering)

DATE

**Filing Fee is \$50.00
Due by May 1, 2005**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGR
BRODEY, ARCHIBALD F III
15150 SW 24TH PLACE
DAVIE, FL 33326**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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10. ADDITIONS/CHANGES

TITLE
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STREET ADDRESS
CITY - ST - ZIP

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11. I hereby certify that the information supplied with this filing does not qualify 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 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: Archie F Brodey III

3-15-05 954 384 4190

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

Date

Daytime Phone #