

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000053010

FILED
Apr 16, 2007
Secretary of State

Entity Name: BLACK MOUNTAIN FORD, LLC

Current Principal Place of Business:

304 BLACK MOUNTAIN AVENUE
BLACK MOUNTAIN, NC 28711

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 880
BLACK MOUNTAIN, NC 28711

New Mailing Address:

FEI Number: 04-3795907 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SLATER, DENNIS B
15908 MCGLAMERY ROAD
ODESSA, FL 33556 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: MGRM () Delete
Name: BUCHANAN, VERN
Address: 7075 WASHINGTON BLVD
City-St-Zip: SARASOTA, FL 34226

Title: T () Delete
Name: HIRSMAN, STEVE
Address: 707 S WASHINGTON BLVD
City-St-Zip: SARASOTA, FL 34236

Title: CNT (X) Delete
Name: SLATER, DENNIS
Address: 707 S WASHINGTON BLVD
City-St-Zip: SARASOTA, FL 34236

Title: VPS (X) Delete
Name: TOSCH, JOHN
Address: 707 S WASHINGTON BLVD
City-St-Zip: SARASOTA, FL 34236

Title: VP (X) Delete
Name: GALUSZKA, JAMES
Address: 304 BLACK MOUNTAIN AVE
City-St-Zip: BLACK MOUNTAIN, NC 28711

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GALUSZKA, JAMES
Address: 304 BLACK MOUNTAIN AVE
City-St-Zip: BLACK MOUNTAIN, NC 28711

Title: MGR (X) Change () Addition
Name: WARREN, JAMES C
Address: 304 BLACK MOUNTAIN AVE
City-St-Zip: BLACK MOUNTAIN, NC 28711

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: JAMES GALUSZKA

MGRM

04/16/2007

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